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| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | -                             |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par             | t 1: Identify Yourself  |  |   |
|-----------------|---|--|---|
|                 |   | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.              | Your full name  |  |   |
|                 | Write the name that is on your government-issued  | Severiano First name                     | Maria First name                              |
| pi<br>ex<br>lic | picture identification (for example, your driver's  | riistname                                | riist name                                    |
|                 | license or passport).   | Middle name                              | Middle name                                   |
|                 | Bring your picture identification to your   | Blancas                                  | Martinez                                      |
|                 | meeting with the trustee.   | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
|                 |   |  |   |
| 2.              | All other names you have used in the last 8 years   |  |   |
|                 | Include your married or maiden names.   |  |   |
|                 |   |  |   |
| 3.              | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9660                              | xxx-xx-2036                                   |
|                 |   |  |   |

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Debtor 1 **Severiano Blancas** Debtor 2 **Maria Martinez** 

Case number (if known)

|    |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |
|----|---|---|---|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names  | I have not used any business name or EINs.  Business name(s)  EINs  | ■ I have not used any business name or EINs.  Business name(s)  EINs  |  |  |
| 5. | Where you live  | 3425 W. 74th St. Chicago, IL 60629  Number, Street, City, State & ZIP Code  | If Debtor 2 lives at a different address:   |  |  |
|    |   | Cook  | Number, Street, City, State & ZIP Code  |  |  |
|    |   | County  | County  |  |  |
|    |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |  |  |
|    |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |  |  |
| 6. | Why you are choosing this district to file for bankruptcy  Over the last 180 days before filing this pet I have lived in this district longer than in an other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |  |  |
|    |   |   |   |  |  |

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|     | btor 2 Maria Martinez  | <b>.</b>   |   | _  | Case number (if known)   |             |  |
|-----|--|--|---|--|--|-------------|--|
| Pai | rt 2: Tell the Court About   | Your Bankruptcy Ca   | ase   |  |  |             |  |
| 7.  | The chapter of the Bankruptcy Code you are   |  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |  |  |             |  |
|     | choosing to file under   | Chapter 7  |   |  |  |             |  |
|     |  | ☐ Chapter 11   |   |  |  |             |  |
|     |  | ☐ Chapter 12   |   |  |  |             |  |
|     |  | ☐ Chapter 13   |   |  |  |             |  |
| 8.  | How you will pay the fee   | about how your order. If your a pre-printed   I need to pa | ou may pay. Typically, if you are<br>attorney is submitting your pay<br>address.<br>y the fee in installments. If yo  | e paying the fee y<br>yment on your be<br>ou choose this opt | eck with the clerk's office in your local court for more det<br>yourself, you may pay with cash, cashier's check, or mo<br>half, your attorney may pay with a credit card or check we<br>tion, sign and attach the Application for Individuals to Pa | ney<br>vith |  |
|     |  | I request the but is not recapplies to yo                  | uired to, waive your fee, and m<br>ur family size and you are unat  | request this optionary do so only if yole to pay the fee     | on only if you are filing for Chapter 7. By law, a judge moyour income is less than 150% of the official poverty line in installments). If you choose this option, you must fill official Form 103B) and file it with your petition.                 | that        |  |
| 9.  | Have you filed for   | ■ No.  |   |  |  |             |  |
|     | bankruptcy within the last 8 years?  | ☐ Yes.   |   |  |  |             |  |
|     |  | District   |   | When   | Case number  |             |  |
|     |  | District   |   | When   | Case number  |             |  |
|     |  | District   |   | When   | Case number  |             |  |
| 10. | Are any bankruptcy   | ■ No   |   |  |  |             |  |
|     | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes.   |   |  |  |             |  |
|     |  | Debtor   |   |  | Relationship to you  |             |  |
|     |  | District   |   | When   | Case number, if known  |             |  |
|     |  | Debtor   |   |  | Relationship to you  |             |  |
|     |  | District   |   | When   | Case number, if known  |             |  |
| 11. | Do you rent your   | ■ No. Go to  | ine 12.   |  |  |             |  |
|     | residence?   | ☐ Yes. Has yo  | our landlord obtained an evictio  | n judgment agair   | nst you and do you want to stay in your residence?   |             |  |
|     |  |  | No. Go to line 12.  |  |  |             |  |
|     |  |  | Yes. Fill out <i>Initial Statement</i> bankruptcy petition.   | About an Evictior  | n Judgment Against You (Form 101A) and file it with this   |             |  |

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| Deb | Maria Martinez  |                    |  |                                      | Case number (if known)  |  |  |
|-----|---|--------------------|--|--------------------------------------|---|--|--|
|     |   |                    |  |                                      |   |  |  |
| Par | Report About Any Bu   | ısinesses          | You Own  | as a Sole Proprie                    | tor   |  |  |
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.              | Go to  | Part 4.                              |   |  |  |
|     |   | ☐ Yes.             | Name   | and location of bus                  | siness  |  |  |
|     | A sole proprietorship is a  |                    |  |                                      |   |  |  |
|     | business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                    |  | of business, if any                  |   |  |  |
|     | If you have more than one sole proprietorship, use a separate sheet and attach  |                    | Numb   | er, Street, City, Sta                | te & ZIP Code   |  |  |
|     | it to this petition.  |                    | Chec   | k the appropriate bo                 | ox to describe your business:   |  |  |
|     |   |                    |  | Health Care Busin                    | ness (as defined in 11 U.S.C. § 101(27A))   |  |  |
|     |   |                    |  | Single Asset Real                    | I Estate (as defined in 11 U.S.C. § 101(51B))   |  |  |
|     |   |                    |  | Stockbroker (as d                    | defined in 11 U.S.C. § 101(53A))  |  |  |
|     |   |                    |  | Commodity Broke                      | er (as defined in 11 U.S.C. § 101(6))   |  |  |
|     |   |                    |  | None of the above                    | e   |  |  |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?                           | deadline operation | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). |                                      |   |  |  |
|     | For a definition of small   | ■ No.              | I am r   | not filing under Chap                | oter 11.  |  |  |
|     | business debtor, see 11 U.S.C. § 101(51D).  | □ No.              | I am f<br>Code   |                                      | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |  |  |
|     |   | ☐ Yes.             | I am f   | lling under Chapter                  | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |  |
| Par | t 4: Report if You Own or   | · Have Anv         | , Hazardo  | us Property or An                    | y Property That Needs Immediate Attention   |  |  |
|     | Do you own or have any  | ■ No.              | , mazar ac   | <u></u>                              | y r roporty rmar recours miniounate reconstruction                                      |  |  |
|     | property that poses or is   |                    |  |                                      |   |  |  |
|     | alleged to pose a threat<br>of imminent and   | ☐ Yes.             | What is  | the hazard?                          |   |  |  |
|     | identifiable hazard to<br>public health or safety?  |                    |  |                                      |   |  |  |
|     | Or do you own any property that needs immediate attention?  |                    |  | liate attention is why is it needed? |   |  |  |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?                 |                    | Where is   | s the property?                      | Number, Street, City, State & Zip Code  |  |  |
|     |   |                    |  |                                      | , ,   |  |  |

Debtor 1

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| Debtor 1 | Severiano Blancas | Boodinione | 1 ago 0 0.00           |  |
|----------|-------------------|------------|------------------------|--|
| Debtor 2 | Maria Martinez    |            | Case number (if known) |  |
|          |                   |            |                        |  |

Part 5: Explain Yo

Explain Your Efforts to Receive a Briefing About Credit Counseling

### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-34432 Doc 1 Filed 11/16/17 Entered 11/16/17 19:16:40 Desc Main Document Page 6 of 56

|   | otor 2 Maria Martinez  | <b>5</b>           |  |                                  | Case number                           | (if known)  |  |  |
|---|--|--------------------|--|----------------------------------|---------------------------------------|---|--|--|
| Par   | t 6: Answer These Quest  | ions for R         | eporting Purposes  |                                  |                                       |   |  |  |
| 16.   | What kind of debts do you have?                                      | 16a.               | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."         |                                  |                                       |   |  |  |
|   |  |                    | ☐ No. Go to line 16b.  |                                  |                                       |   |  |  |
|   |  |                    | Yes. Go to line 17.  |                                  |                                       |   |  |  |
|   |  | 16b.               | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. |                                  |                                       |   |  |  |
|   |  |                    | ☐ No. Go to line 16c.  |                                  |                                       |   |  |  |
|   |  |                    | ☐ Yes. Go to line 17.  |                                  |                                       |   |  |  |
|   |  | 16c.               | State the type of debts you owe  | that are not consur              | mer debts or business                 | s debts   |  |  |
| 17.   | Are you filing under Chapter 7?                                      | □ No.              | I am not filing under Chapter 7. C   | Go to line 18.                   |                                       |   |  |  |
|   | Do you estimate that<br>after any exempt<br>property is excluded and | ■ Yes.             | are paid that funds will be availal  |                                  |                                       | erty is excluded and administrative expenses  |  |  |
|   | administrative expenses<br>are paid that funds will                  |                    | ■ No   |                                  |                                       |   |  |  |
| be available for<br>distribution to unsecured<br>creditors? |  |                    | ☐ Yes  |                                  |                                       |   |  |  |
| 18.   | How many Creditors do  | <b>1</b> -49       |  | <b>1</b> ,000-5,000              |                                       | □ 25,001-50,000   |  |  |
|   | you estimate that you owe?   | □ 50-99            |  | <b>5001-10,000</b>               |                                       | ☐ 50,001-100,000  |  |  |
|   |  | □ 100-1<br>□ 200-9 |  | □ 10,001-25,0                    | 00                                    | ☐ More than100,000  |  |  |
| 19.   | How much do you  | □ \$0 - \$         | 50.000   | □ \$1,000,001                    | - \$10 million                        | ☐ \$500,000,001 - \$1 billion   |  |  |
|   | estimate your assets to be worth?                                    |                    | 01 - \$100,000   | □ \$10,000,001                   | - \$50 million                        | □ \$1,000,000,001 - \$10 billion  |  |  |
|   | o worth.   |                    | 001 - \$500,000<br>001 - \$1 million   | □ \$50,000,001<br>□ \$100,000,00 | - \$100 million<br>01 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion                           |  |  |
| 20.   | How much do you  | □ \$0 - \$         | 50.000   | □ \$1,000,001                    | - \$10 million                        | □ \$500,000,001 - \$1 billion   |  |  |
|   | estimate your liabilities to be?                                     |                    | 001 - \$100,000  | □ \$10,000,001                   | - \$50 million                        | □ \$1,000,000,001 - \$10 billion  |  |  |
|   | to be:   | <b>\$</b> 100,     | 001 - \$500,000  | \$50,000,001                     |                                       | □ \$10,000,000,001 - \$50 billion   |  |  |
|   |  | □ \$500,           | 001 - \$1 million  | \$100,000,00                     | 01 - \$500 million                    | ☐ More than \$50 billion  |  |  |
| Par   | t 7: Sign Below  |                    |  |                                  |                                       |   |  |  |
| For   | you  | I have ex          | amined this petition, and I declare  | e under penalty of p             | perjury that the inform               | ation provided is true and correct.   |  |  |
|   |  |                    | chosen to file under Chapter 7, I a<br>tates Code. I understand the relief   |                                  |                                       | under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.         |  |  |
|   |  |                    | rney represents me and I did not p<br>nt, I have obtained and read the no  |                                  |                                       | an attorney to help me fill out this  |  |  |
|   |  | I request          | relief in accordance with the chap   | oter of title 11, Unite          | ed States Code, spec                  | ified in this petition.   |  |  |
|   |  |                    | cy case can result in fines up to \$2  |                                  |                                       | property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, |  |  |
|   |  | /s/ Seve           | eriano Blancas   |                                  | /s/ Maria Martine                     | z   |  |  |
|   |  |                    | no Blancas<br>e of Debtor 1  |                                  | Maria Martinez Signature of Debtor    | 2   |  |  |
|   |  | Executed           | d on November 16, 2017   |                                  | Executed on Nov                       | rember 16, 2017   |  |  |
|   |  |                    | MM / DD / YYYY   |                                  |                                       | / DD / YYYY   |  |  |

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| Debtor 1<br>Debtor 2 | Severiano Blancas<br>Maria Martinez           | Document  | Page 7 of 56             | ase number (if known)            |                             |
|----------------------|---|---|--------------------------|----------------------------------|-----------------------------|
|                      |   |   |                          |                                  |                             |
| •                    | attorney, if you are<br>ted by one            | I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify | ed States Code, and have | explained the relief av          | vailable under each chapter |
| •                    | not represented by ey, you do not need spage. | and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.  |                          |                                  |                             |
|                      |   | /s/ David Freydin Signature of Attorney for Debtor  | Date                     | November 16, 2<br>MM / DD / YYYY | 2017                        |

Email address

David Freydin
Printed name

8707 Skokie Blvd Suite 305 Skokie, IL 60077 Number, Street, City, State & ZIP Code

Contact phone

**6286192**Bar number & State

Law Offices of David Freydin, Ltd.

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|                     |                          | 1700.11111        | <u>:111 Paue o 01 50</u> |  |
|---------------------|--------------------------|-------------------|--------------------------|--|
| Fill in this infor  | mation to identify your  | case:             |                          |  |
| Debtor 1            | Severiano Blanca         | ıs                |                          |  |
|                     | First Name               | Middle Name       | Last Name                |  |
| Debtor 2            | Maria Martinez           |                   |                          |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name                |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS              |  |
| Case number         |                          |                   |                          |  |
| (if known)          |                          |                   |                          | ☐ Check if this is a<br>amended filing |

## Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| 2.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$<br>\$<br>\$ | of what you own<br>125,000.00<br>22,490.62 |
|-----|---|----------------|--|
| Pai | 1a. Copy line 55, Total real estate, from Schedule A/B  | \$<br>\$       | 147,490.62                                 |
| 2.  | 1c. Copy line 63, Total of all property on Schedule A/B   | \$             | 147,490.62                                 |
| 2.  | t 2: Summarize Your Liabilities  Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)   |                | iabilities                                 |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  |                |  |
|     |   |                |  |
|     |   |                |  |
| _   | 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  | \$             | 166,694.00                                 |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F             | \$             | 0.0  |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$             | 22,088.00                                  |
|     | Your total liabilities  | \$             | 188,782.00                                 |
| Pai | t3: Summarize Your Income and Expenses  |                |  |
| 1.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$             | 3,561.58                                   |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$             | 3,891.2                                    |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records  |                |  |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you      | ur other sc    | hedules.                                   |
|     | ■ Yes What kind of debt do you have?  |                |  |
|     | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your yes |                | her sc                                     |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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|----------|-------------------|----------|------------------------|--|
|          | Severiano Blancas |          | 9                      |  |
| Debtor 2 | Maria Martinez    |          | Case number (if known) |  |

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |    | 5.074.00 |
|----|--|----|----------|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              | \$ | 5,274.00 |
|    |  | 1  |          |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total | al claim |
|--|-------|----------|
| From Part 4 on Schedule E/F, copy the following:   |       |          |
| 9a. Domestic support obligations (Copy line 6a.)   | \$_   | 0.00     |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_   | 0.00     |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_   | 0.00     |
| 9d. Student loans. (Copy line 6f.)   | \$_   | 0.00     |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_   | 0.00     |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$_  | 0.00     |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$    | 0.00     |

|                            | Cas   | se 17-34432                                    | Doc 1   |              | 11/16/17<br>ument                         | Entered 11/16/17   | 19:16:40  | Desc                  | Main   |
|----------------------------|---|--|---|--------------|---|--|---|-----------------------|--|
| Fill                       | in this inform                                  | ation to identify you                          | ur case and t   |              |   |  |   |                       |  |
| Deb                        | otor 1  | Severiano Blan                                 | cas   |              |   |  |   |                       |  |
|                            |   | First Name                                     |   | e Name       |   | Last Name  |   |                       |  |
|                            | otor 2<br>use, if filing)                       | Maria Martinez First Name                      | Middl   | e Name       |   | Last Name  |   |                       |  |
| Uni                        | ted States Ban                                  | kruptcy Court for the                          | : NORTHER   | RN DISTF     | RICT OF ILLIN                             | IOIS   |   |                       |  |
| Cas                        | se number                                       |  |   |              |   | -  |   |                       | Check if this is an amended filing               |
| SC<br>n ea<br>hink<br>nfor | chedule<br>ch category, se<br>tit fits best. Be | as complete and accu<br>space is needed, attac | ribe items. List<br>Irate as possib                           | le. If two i | married people                            | n asset fits in more than one o<br>e are filing together, both are e<br>e top of any additional pages, v | qually responsib  | le for supply         | ing correct                                      |
|                            | o you own or had No. Go to Part Yes. Where is   | 2.   | ble interest in a   | any reside   | ence, building,                           | land, or similar property?   |   |                       |  |
| 1.1                        | 3425 W. 74                                      | th St  |   | What         |   | ? Check all that apply   |   |                       |  |
|                            |   | available, or other description                | ble, or other description Dupley or multi-unit building the a |              | the amount of an                          | y secured cla  | or exemptions. Put hims on Schedule D: Secured by Property. |                       |  |
|                            | Chicago   | IL 60  | <b>0629-0000</b> ZIP Code                                     |              | Manufactured Land                         | or mobile home   | Current value of entire property?                           | pe                    | urrent value of the ortion you own? \$125,000.00 |
|                            |   |  |   | Uho P        | Other<br>nas an interest<br>Debtor 1 only | in the property? Check one   |   | ple, tenancy<br>nown. | ownership interest<br>y by the entireties, or    |
|                            | Cook County                                     |  |   |              |   | the debtors and another bu wish to add about this item,  | (see instruction  |                       | nity property                                    |
|                            |   |  |   |              | -   | 005 for \$180,000  |   |                       |  |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$125,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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| Cars, van  |  | Ca   | ise number (if known)    |   |
|--|--|--|--------------------------|---|
| Пис  | s, trucks, tractors, sport utility ve  | ehicles, motorcycles   |                          |   |
| - 110  |  |  |                          |   |
| ■ Yes  |  |  |                          |   |
|  | Danda  |  | Do not deduct secured of | claims or exemptions. Put   |
| 3.1 Make:  | Pontiac  | Who has an interest in the property? Check one   | the amount of any secur  | ed claims on Schedule D:  |
| Model:   |  | ☐ Debtor 1 only  | Creditors Who Have Cla   | ims Secured by Property.  |
| Year:  | 1998 dimate mileage: 190,000   | Debtor 2 only  | Current value of the     | Current value of the  |
|  | kimate mileage: 190,000  | ■ Debtor 1 and Debtor 2 only   | entire property?         | portion you own?  |
| Otheri   | mornation.   | At least one of the debtors and another  |                          |   |
|  |  | ☐ Check if this is community property (see instructions)   | \$100.00                 | \$100.0   |
| .2 Make:   | Ford   | Who has an interest in the property? Check one   |                          | claims or exemptions. Put ed claims on Schedule D:                                |
| Model:   | Explorer   | ☐ Debtor 1 only  |                          | ims Secured by Property.  |
| Year:  | 2003   | ☐ Debtor 2 only  | Current value of the     | Current value of the  |
| Approx   | kimate mileage: 250000   | ■ Debtor 1 and Debtor 2 only   | entire property?         | portion you own?  |
| Other i  | information:   | $\square$ At least one of the debtors and another  |                          |   |
|  |  | ☐ Check if this is community property (see instructions)   | \$200.00                 | \$200.0   |
| 3 Make:<br>Model:  | Chevrolet Equinox  | Who has an interest in the property? Check one  Debtor 1 only  | the amount of any secur  | claims or exemptions. Put<br>ed claims on Schedule D:<br>ims Secured by Property. |
| Year:  | 2013   | ☐ Debtor 2 only  | Current value of the     | Current value of the  |
| Approx   | kimate mileage: 80,000   | ■ Debtor 1 and Debtor 2 only   | entire property?         | portion you own?  |
| Other i  | information:   | $\square$ At least one of the debtors and another  |                          |   |
|  |  | ☐ Check if this is community property (see instructions)   | \$18,000.00              | \$18,000.0  |
|  |  | ☐ Check if this is community property  | \$18,000.00              | \$18,000  |
| Examples: ■ No   |  | nd other recreational vehicles, other vehicles, and atercraft, fishing vessels, snowmobiles, motorcycle a                    |                          |   |
| Examples:<br>■ No  |  |  |                          |   |
| Examples:  ■ No □ Yes  Add the o   | Boats, trailers, motors, personal water trailers, motors, personal |  | oy entries for           | \$18,300.00   |
| ■ No □ Yes  Add the conpages you   | Boats, trailers, motors, personal water than the second state of the portion you over the part 2. Write  | atercraft, fishing vessels, snowmobiles, motorcycle a  vn for all of your entries from Part 2, including an that number here | occessories              | \$18,300.00   |
| ■ No □ Yes  Add the contages yourt 3: Description                                | Boats, trailers, motors, personal wants of the portion you over a straight of the portion you over have attached for Part 2. Write   | atercraft, fishing vessels, snowmobiles, motorcycle a  vn for all of your entries from Part 2, including an that number here | by entries for           | Current value of the portion you own?   |
| ■ No □ Yes  Add the copages your own  Househol Examples □ No                     | Boats, trailers, motors, personal wards and the portion you over the portion you over the portion you over the portion and the portion of the portion you over the portion of the portion you over the portion of the portion you over the portion of the portion of the portion you over the portion of the po | vn for all of your entries from Part 2, including an that number heretems  tems  nterest in any of the following items?      | by entries for           | Current value of the portion you own? Do not deduct secured                       |
| ■ No □ Yes  Add the copages yourt 3: Description you own  Househol Examples □ No | Boats, trailers, motors, personal wards and the portion you over the portion you or have any legal or equitable in the portion of the portion you over the portion you or have any legal or equitable in the portion you over the portion you or have any legal or equitable in the portion you over the portion you over the portion you or have any legal or equitable in the portion you over th | vn for all of your entries from Part 2, including an that number heretems  tems  nterest in any of the following items?      | by entries for           | Current value of the portion you own? Do not deduct secured                       |

Official Form 106A/B Schedule A/B: Property page 2

Case 17-34432 Doc 1 Filed 11/16/17 Entered 11/16/17 19:16:40 Desc Main Page 12 of 56 Document Severiano Blancas Debtor 1 Debtor 2 **Maria Martinez** Case number (if known) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$300.00 cell phones, TVs 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$250.00 Jewelrv Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... \$400.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1.950.00 for Part 3. Write that number here .....

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Document Page 13 of 56 Severiano Blancas Debtor 1 Debtor 2 **Maria Martinez** Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ Yes..... Cash \$250.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Chase \$90.62 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

Official Form 106A/B Schedule A/B: Property page 4

■ No

Case 17-34432

Doc 1

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|                        | Case 17-34432  | DOC 1                       | Document                  | Page 14 of 56             | 0/17 19.16.40            | Desc Main  |
|------------------------|--|-----------------------------|---------------------------|---------------------------|--------------------------|--|
| Debtor 1<br>Debtor 2   | Severiano Blancas<br>Maria Martinez  |                             | Document                  | G                         | ase number (if known)    |  |
| ☐ Yes.                 | . Give specific information al   | oout them                   |                           |                           |                          |  |
| Exam<br>■ No           | ses, franchises, and other g   | sive licenses               |                           | n holdings, liquor licens | es, professional licens  | es   |
| ⊔ Yes.                 | . Give specific information al   | oout tnem                   |                           |                           |                          |  |
| Money or               | property owed to you?  |                             |                           |                           |                          | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| ☐ No                   | efunds owed to you  . Give specific information ab                                 | out them inc                | cluding whether you alre  | eady filed the returns an | d the tay years          |  |
| _ 103                  | . Give specific information ab   | out them, in                | duding whether you and    | ady med the returns an    | a the tax years          |  |
|                        |  | Proj                        | ected tax refund for      | 2017                      | Federal                  | \$1,900.00   |
| ■ No                   | y support  pples: Past due or lump sum a  Give specific information                |                             | usal support, child supp  | ort, maintenance, divord  | e settlement, property   | settlement   |
|                        | amounts someone owes y<br>nples: Unpaid wages, disabilit<br>benefits; unpaid loans | y insurance                 |                           | efits, sick pay, vacation | pay, workers' compe      | nsation, Social Security   |
| ☐ Yes.                 | . Give specific information  |                             |                           |                           |                          |  |
|                        | sts in insurance policies aples: Health, disability, or life                       | insurance; h                | nealth savings account (  | HSA); credit, homeown     | er's, or renter's insura | nce  |
| ☐ Yes.                 | . Name the insurance compa<br>Comp   | ny of each po<br>pany name: | olicy and list its value. | Beneficiar                | y:                       | Surrender or refund value:   |
| If you                 | nterest in property that is d<br>are the beneficiary of a living<br>one has died.  |                             |                           |                           | urrently entitled to rec | eive property because  |
|                        | . Give specific information  |                             |                           |                           |                          |  |
|                        | s against third parties, when apples: Accidents, employment                        |                             |                           |                           | or payment               |  |
|                        | . Describe each claim  |                             |                           |                           |                          |  |
| 34. <b>Other</b> ■ No  | contingent and unliquidate   | ed claims of                | every nature, includin    | g counterclaims of the    | e debtor and rights to   | set off claims   |
|                        | . Describe each claim  |                             |                           |                           |                          |  |
| 35. <b>Any fi</b> ■ No | nancial assets you did not   | aiready list                |                           |                           |                          |  |
| ☐ Yes.                 | . Give specific information  |                             |                           |                           |                          |  |
|                        | the dollar value of all of yo  |                             |                           |                           |                          | \$2,240.62   |

Official Form 106A/B Schedule A/B: Property page 5

Case 17-34432 Doc 1 Filed 11/16/17 Entered 11/16/17 19:16:40 Desc Main Page 15 of 56 Document Severiano Blancas Debtor 1 Debtor 2 **Maria Martinez** Case number (if known) Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$125,000.00 56. Part 2: Total vehicles, line 5 \$18,300.00 57. Part 3: Total personal and household items, line 15 \$1,950.00 Part 4: Total financial assets, line 36 58. \$2,240.62 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$22,490,62 Copy personal property total \$22,490,62

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$147,490.62

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|   |                         |                   | III FAUE 10 01:30 |                                      |
|---|-------------------------|-------------------|-------------------|--------------------------------------|
| Fill in this infor                      | mation to identify your | case:             |                   |                                      |
| Debtor 1                                | Severiano Blanca        | as                |                   |                                      |
|   | First Name              | Middle Name       | Last Name         |                                      |
| Debtor 2                                | Maria Martinez          |                   |                   |                                      |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name         |                                      |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS       |                                      |
| Case number                             |                         |                   |                   |                                      |
| (if known)                              |                         |                   |                   | ☐ Check if this is an amended filing |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Id | entify the | Property | / You C | Claim as | Exemp | ١t |
|------------|------------|----------|---------|----------|-------|----|
|------------|------------|----------|---------|----------|-------|----|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B  | Che | ck only one box for each exemption.                             |                                    |
| 3425 W. 74th St. Chicago, IL 60629<br>Cook County                                      | \$125,000.00                         | •   | \$30,000.00   | 735 ILCS 5/12-901                  |
| Purchased in 2005 for \$180,000<br>Line from <i>Schedule A/B</i> : 1.1                 |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| 1998 Pontiac Grand Prix 190,000 miles  | \$100.00                             |     | \$100.00  | 735 ILCS 5/12-1001(c)              |
| Line from Schedule A/B: 3.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2003 Ford Explorer 250000 miles  | \$200.00                             |     | \$200.00  | 735 ILCS 5/12-1001(c)              |
| Ellie Holli Golloddie 172. GL  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Line from Schedule A/B: 11.1   | \$250.00                             |     | \$250.00  | 735 ILCS 5/12-1001(a)              |
|  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| - Line from Schedule A/B: 12.1   | \$400.00                             |     | \$400.00  | 735 ILCS 5/12-1001(b)              |
| Ellic Holli Golledale A/D. 12-1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |

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Severiano Blancas

**Maria Martinez** Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash 735 ILCS 5/12-1001(b) \$250.00 \$250.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: Chase** 735 ILCS 5/12-1001(b) \$90.62 \$90.62 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Federal: Projected tax refund for 735 ILCS 5/12-1001(b) \$1,900.00 \$1,900.00 2017 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

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|  |                              | Document   | Page 1             | 18 of 56                          |  |                   |
|--|------------------------------|--|--------------------|-----------------------------------|--|-------------------|
| Fill in this informa                               | ation to identify you        | ır case:   |                    |                                   |  |                   |
| Debtor 1   | Severiano Bland              | cas  |                    |                                   |  |                   |
| Dobto. 1   | First Name                   | Middle Name  | Last Name          |                                   |  |                   |
| Debtor 2   | Maria Martinez               |  |                    |                                   |  |                   |
| (Spouse if, filing)                                | First Name                   | Middle Name  | Last Name          |                                   |  |                   |
| United States Rank                                 | kruptcy Court for the:       | NORTHERN DISTRICT OF ILLI  | NOIS               |                                   |  |                   |
| Officed States Daili                               | kruptcy Court for the.       | NORTHER BOTH OF IEEE   | 11010              |                                   |  |                   |
| Case number  |                              |  |                    |                                   |  |                   |
| (if known)   |                              |  |                    |                                   | ☐ Check                                | if this is an     |
|  |                              |  |                    |                                   | amend                                  | led filing        |
| O(() -1 -1 -                                       | 400D                         |  |                    |                                   |  |                   |
| Official Form                                      | 106D                         |  |                    |                                   |  |                   |
| Schedule [   | D: Creditors                 | Who Have Claims S  | 3ecure             | ed by Propert                     | y                                      | 12/15             |
|  |                              | If two married people are filing togethe   |                    |                                   |  |                   |
| is needed, copy the <i>l</i><br>number (if known). | Additional Page, till it o   | out, number the entries, and attach it to  | o this form.       | On the top of any addition        | nal pages, write your nai              | me and case       |
| • •  | ave claims secured by        | your property?   |                    |                                   |  |                   |
|  | _                            | his form to the court with your other s  | schedules          | You have nothing else t           | o report on this form                  |                   |
| _  |                              | ,  | oricadics.         | Tod flave flottling cise t        | o report on this form.                 |                   |
| ■ Yes. Fill in a                                   | all of the information       | below.   |                    |                                   |  |                   |
| Part 1: List All                                   | Secured Claims               |  |                    |                                   |  |                   |
|  |                              | more than one secured claim, list the cred   |                    |                                   | Column B                               | Column C          |
|  |                              | a particular claim, list the other creditors<br>cal order according to the creditor's name |                    | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
|  | title cialitis ili alphabeti | cal order according to the creditor's hame   |                    | value of collateral.              | claim                                  | If any            |
| 2.1 Ditech Fina                                    | ancial Llc                   | Describe the property that secures the   | ne claim:          | \$145,250.00                      | \$125,000.00                           | \$20,250.00       |
| Creditor's Name                                    |                              | 3425 W. 74th St. Chicago, IL   | 60629              |                                   |  |                   |
|  |                              | Cook County  |                    |                                   |  |                   |
|  |                              | Purchased in 2005 for \$180,0 As of the date you file, the claim is: 0                     |                    |                                   |  |                   |
| Po Box 617   | · <del>-</del>               | apply.   | nicok ali tilat    |                                   |  |                   |
| Rapid City,  |                              | Contingent   |                    |                                   |  |                   |
| Number, Street, C                                  | City, State & Zip Code       | ☐ Unliquidated   |                    |                                   |  |                   |
| Who owes the deb                                   | t2 Chaak ana                 | Disputed   |                    |                                   |  |                   |
| _  | it? Check one.               | Nature of lien. Check all that apply.  |                    |                                   |  |                   |
| ☐ Debtor 1 only ☐ Debtor 2 only                    |                              |  | iorigage or s      | securea                           |  |                   |
| _  |                              | ☐ Statutory lien (such as tax lien, mech   | hanic's lian)      |                                   |  |                   |
| Debtor 1 and Deb                                   | •                            | _  | namic's herry      |                                   |  |                   |
| _  | e debtors and another        | ☐ Judgment lien from a lawsuit   | Mortagae           |                                   |  |                   |
| ☐ Check if this clai<br>community debt             |                              | Other (including a right to offset)  | Mortgage           | <del>,</del>                      |  |                   |
| •  |                              |  |                    |                                   |  |                   |
| Date debt was incur                                | red                          | Last 4 digits of account numb  | er <u>1107</u>     | <b>7</b>                          |  |                   |
|  |                              |  |                    |                                   |  |                   |
| 2.2 State Farm                                     | Bank                         | Describe the property that secures the   | ne claim:          | \$21,444.00                       | \$18,000.00                            | \$3,444.00        |
| Creditor's Name                                    |                              | 2013 Chevrolet Equinox 80,0  | 00                 |                                   |  |                   |
| A., 5 .  |                              | miles  |                    |                                   |  |                   |
| Attn: Bankı<br>Po Box 232                          |                              | As of the date you file, the claim is: 0   | <br>Check all that |                                   |  |                   |
|  | on, IL 61702                 | apply.   |                    |                                   |  |                   |
|  | City, State & Zip Code       | ☐ Contingent☐ Unliquidated   |                    |                                   |  |                   |
| Number, Street, C                                  | only, State & Zip Code       | ☐ Disputed   |                    |                                   |  |                   |
| Who owes the deb                                   | t? Check one.                | Nature of lien. Check all that apply.  |                    |                                   |  |                   |
| Debtor 1 only                                      |                              | ☐ An agreement you made (such as m   | nortgage or s      | secured                           |  |                   |
| Debtor 2 only                                      |                              | car loan)  |                    |                                   |  |                   |
| ■ Debtor 1 and Deb                                 | ator 2 only                  | ☐ Statutory lien (such as tax lien, mecl   | hanic's lien)      |                                   |  |                   |
| _  | e debtors and another        | ☐ Judgment lien from a lawsuit   | 7                  |                                   |  |                   |
| ☐ Check if this clai                               |                              | <u> </u>   | Purchase           | Money Security                    |  |                   |
| community deb                                      |                              | Other (including a right to offset)  |                    |                                   |  |                   |
| Date debt was incur                                | rod                          | Last 4 digits of account numb  | er 0001            | 1                                 |  |                   |

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| Debtor 1 | Severiano B                        | lancas                       |                                    | Case number (if know) |  |
|----------|------------------------------------|------------------------------|------------------------------------|-----------------------|--|
|          | First Name                         | Middle Name                  | Last Name                          |                       |  |
| Debtor 2 | Maria Martin                       | ez                           |                                    |                       |  |
|          | First Name                         | Middle Name                  | Last Name                          |                       |  |
|          |                                    |                              |                                    |                       |  |
|          |                                    |                              |                                    |                       |  |
| Add the  | dollar value of yo                 | our entries in Column A on   | this page. Write that number here: | \$166,694.00          |  |
|          | the last page of y at number here: | your form, add the dollar va | llue totals from all pages.        | \$166,694.00          |  |
|          |                                    |                              |                                    |                       |  |

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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|--|--|---|--|-----------------------------|
| Fill in this                             | information to identify your   |   |  |                             |
| Debtor 1                                 | Severiano Blanc  | 36  |  |                             |
| Debior 1                                 | First Name   | Middle Name   | Last Name  |                             |
| Debtor 2                                 | Maria Martinez   |   |  |                             |
| (Spouse if, fill                         | ing) First Name  | Middle Name   | Last Name  |                             |
| United Sta                               | ates Bankruptcy Court for the:   | NORTHERN DISTRICT OF IL   | LLINOIS  |                             |
| Case num                                 | ber  |   |  |                             |
| (if known)                               |  |   |  | Check if this is an         |
|  |  |   |  | amended filing              |
| Official                                 | Form 106E/F  |   |  |                             |
|  |  | Vha Hava Unasaurad  | l Claima   | 4 O / 4 E                   |
|  |  | Vho Have Unsecured  | TY claims and Part 2 for creditors with NONPRIORITY of   | 12/15                       |
| Schedule D<br>left. Attach<br>name and c | : Creditors Who Have Claims Se<br>the Continuation Page to this pa<br>ase number (if known). | cured by Property. If more space is<br>ge. If you have no information to re | Do not include any creditors with partially secured clai<br>needed, copy the Part you need, fill it out, number the<br>port in a Part, do not file that Part. On the top of any ac   | entries in the boxes on the |
| Part 1:                                  | List All of Your PRIORITY U  | nsecured Claims   |  |                             |
| •  | creditors have priority unsecur  | ed claims against you?  |  |                             |
| No.                                      | Go to Part 2.  |   |  |                             |
| ☐ Yes                                    | <b>5.</b>  |   |  |                             |
| Part 2:                                  | List All of Your NONPRIORI   | TY Unsecured Claims   |  |                             |
| 3. Do any                                | creditors have nonpriority unse  | cured claims against you?   |  |                             |
| □ No.                                    | You have nothing to report in this   | part. Submit this form to the court with                                    | n your other schedules.  |                             |
| Yes                                      | i.   |   |  |                             |
| unsecu                                   | red claim, list the creditor separate  | ly for each claim. For each claim liste                                     | he creditor who holds each claim. If a creditor has more d, identify what type of claim it is. Do not list claims already have more than three nonpriority unsecured claims fill out | included in Part 1. If more |
|  |  |   |  | Total claim                 |
| 4.1 <b>B</b>                             | lue Cross Blue Shield of I   | Ilinois Last 4 digits of ac   | count number   | \$309.00                    |
|  | onpriority Creditor's Name   |   |  | ·                           |
|  | O 7344   | When was the deb  | t incurred?  |                             |
|  | hicago, IL 60680-7344<br>umber Street City State Zlp Code                                    | As of the date you  | file, the claim is: Check all that apply   |                             |
|  | ho incurred the debt? Check one  |   | and apply  |                             |
|  | Debtor 1 only  | ☐ Contingent  |  |                             |
|  | Debtor 2 only  | ☐ Unliquidated  |  |                             |
|  | Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |                             |
|  | At least one of the debtors and ar   | _ '   | RITY unsecured claim:  |                             |
|  | Check if this claim is for a com   | По  |  |                             |
|  | ebt  | imunity   | ing out of a separation agreement or divorce that you did no   | ot                          |
| Is                                       | the claim subject to offset?   | report as priority cla  |  |                             |
|  | No   | ☐ Debts to pension  | n or profit-sharing plans, and other similar debts   |                             |
|  | Yes  | Other. Specify  | medical bills  |                             |

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| Debto | or 2 Maria Martinez   |  | Case number (if know)                         |            |
|-------|---|--|---|------------|
| 4.2   | Cbusasears Nonpriority Creditor's Name  | Last 4 digits of account number                            | 6534  | \$1,347.00 |
|       | Citicorp Credit Srvs/Centralized Bankrup Po Box 790040                                      | When was the debt incurred?                                | Opened 06/15 Last Active 9/25/17              |            |
|       | Saint Louis, MO 63179  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | is: Check all that apply                      |            |
|       | Debtor 1 only   | ☐ Contingent   |   |            |
|       | Debtor 2 only   | ☐ Unliquidated   |   |            |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                              | d claim:                                      |            |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |
|       | debt<br>Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not  |            |
|       | ■ No  | Debts to pension or profit-sharing                         | g plans, and other similar debts              |            |
|       | Yes   | Other. Specify Charge Acc                                  | count   |            |
| 4.3   | Chase Card  | Last 4 digits of account number                            | 8553  | \$0.00     |
|       | Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington DE 10850      | When was the debt incurred?                                | Opened 05/17 Last Active 10/17                |            |
|       | Wilmington, DE 19850  Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim                         | is: Check all that apply                      |            |
|       | Debtor 1 only   | ☐ Contingent   |   |            |
|       | ☐ Debtor 2 only   | ☐ Unliquidated   |   |            |
|       | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                              | d claim:                                      |            |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |
|       | debt<br>Is the claim subject to offset?   | report as priority claims                                  | aration agreement or divorce that you did not |            |
|       | ■ No  | Debts to pension or profit-sharing                         | g plans, and other similar debts              |            |
|       | Yes   | ■ Other. Specify Credit Card                               | <u> </u>                                      |            |
| 4.4   | Chase Card Services Nonpriority Creditor's Name   | Last 4 digits of account number                            | 1640  | \$0.00     |
|       | Correspondence Dept Po Box 15278 Wilmington, DE 19850                                       | When was the debt incurred?                                | Opened 04/07 Last Active 03/09                |            |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.                        | As of the date you file, the claim                         | is: Check all that apply                      |            |
|       | Debtor 1 only   | ☐ Contingent   |   |            |
|       | ☐ Debtor 2 only   | ☐ Unliquidated   |   |            |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                              | d claim:                                      |            |
|       | ☐ Check if this claim is for a community debt   | ☐ Student loans ☐ Obligations arising out of a sepa        | aration agreement or divorce that you did not |            |
|       | Is the claim subject to offset?   | report as priority claims                                  | ,   |            |
|       | ■ No  | Debts to pension or profit-sharing                         | g plans, and other similar debts              |            |
|       | ☐ Yes   | ■ Other. Specify Credit Card                               | I   |            |

Debtor 1 Severiano Blancas

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| Debt | or 2 Maria Martinez  |  | Case number (if know)                         |        |
|------|--|--|---|--------|
| 4.5  | Citizens Bank  | Last 4 digits of account number                            | 0969  | \$0.00 |
|      | Nonpriority Creditor's Name Attn: Bankruptcy 443 Jefferson Blvd Ms Rjw-135 Warwick, RI 02886 | When was the debt incurred?                                | Opened 12/06 Last Active 2/01/08              |        |
|      | Number Street City State Zlp Code  | As of the date you file, the claim                         | is: Check all that apply                      |        |
|      | Who incurred the debt? Check one.  |  |   |        |
|      | ☐ Debtor 1 only  | ☐ Contingent   |   |        |
|      | Debtor 2 only  | ☐ Unliquidated   |   |        |
|      | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |        |
|      | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                               | d claim:                                      |        |
|      | Check if this claim is for a community   | Student loans  |   |        |
|      | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |        |
|      | No   | Debts to pension or profit-sharing                         | ng plans, and other similar debts             |        |
|      | □ Yes  | Other. Specify Unsecured                                   | •   |        |
|      | in res   | Other. Specify   |   |        |
| 4.6  | Citizens Bank Nonpriority Creditor's Name  | Last 4 digits of account number                            | 4882  | \$0.00 |
|      | Attn: Bankruptcy<br>443 Jefferson Blvd Ms Rjw-135  | When was the debt incurred?                                | Opened 4/11/08 Last Active 10/26/16           |        |
|      | Warwick, RI 02886  Number Street City State Zlp Code   | As of the date you file, the claim                         | is: Check all that apply                      |        |
|      | Who incurred the debt? Check one.  | ne of the date you me, me olum                             | or check an that apply                        |        |
|      | ■ Debtor 1 only  | ☐ Contingent   |   |        |
|      | ☐ Debtor 2 only  | ☐ Unliquidated   |   |        |
|      | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |        |
|      | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                               | d claim:                                      |        |
|      | ☐ Check if this claim is for a community   | ☐ Student loans  |   |        |
|      | debt   |  | aration agreement or divorce that you did not |        |
|      | Is the claim subject to offset?  | report as priority claims                                  |   |        |
|      | ■ No   | Debts to pension or profit-sharing                         | 01  |        |
|      | ☐ Yes  | ■ Other. Specify Credit Line                               | Secured                                       |        |
| 4.7  | Comenity Bank/Carsons Nonpriority Creditor's Name  | Last 4 digits of account number                            | 2999  | \$0.00 |
|      | Po Box 182125<br>Columbus, OH 43218  | When was the debt incurred?                                | Opened 10/14 Last Active 10/14                |        |
|      | Number Street City State Zlp Code  | As of the date you file, the claim                         | is: Check all that apply                      |        |
|      | Who incurred the debt? Check one.  ☐ Debtor 1 only   |  |   |        |
|      | ,  | ☐ Contingent   |   |        |
|      | ■ Debtor 2 only  | ☐ Unliquidated   |   |        |
|      | Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecure                   | d claim:                                      |        |
|      | ☐ At least one of the debtors and another  | Student loans  | u Claiiii.                                    |        |
|      | ☐ Check if this claim is for a community debt  Is the claim subject to offset?               | _  | aration agreement or divorce that you did not |        |
|      | No   | Debts to pension or profit-sharir                          | ng plans, and other similar debts             |        |
|      |  |  |   |        |
|      | ☐ Yes  | Other. Specify Charge Ac                                   | Count   |        |

Debtor 1 Severiano Blancas

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| Debtor<br>Debtor | 1 Severiano Blancas<br>2 Maria Martinez   |  | Case number (if know)                         |        |  |
|------------------|---|--|---|--------|--|
| 4.8              | Comenity Bank/Harlem Furniture  | Last 4 digits of account number                              | 3066  | \$0.00 |  |
|                  | Po Box 182125<br>Columbus, OH 43218   | When was the debt incurred?                                  | Opened 02/14 Last Active 2/07/15              |        |  |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.             | As of the date you file, the claim                           | is: Check all that apply                      |        |  |
|                  | Debtor 1 only   | ☐ Contingent   |   |        |  |
|                  | Debtor 2 only   | ☐ Unliquidated   |   |        |  |
|                  | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |        |  |
|                  | ☐ At least one of the debtors and another                                       | Type of NONPRIORITY unsecured                                | d claim:                                      |        |  |
|                  | ☐ Check if this claim is for a community  | ☐ Student loans  |   |        |  |
|                  | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |        |  |
|                  | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts              |        |  |
|                  | □Yes  | Other. Specify Charge Acc                                    | count   |        |  |
| 4.9              | Fortiva H/mabtc/atls  | Last 4 digits of account number                              | 2458  | \$0.00 |  |
|                  | Nonpriority Creditor's Name Po Box 10555 Atlanta, GA 30310                      | When was the debt incurred?                                  | Opened 07/17 Last Active 10/17                |        |  |
| •                | Number Street City State Zlp Code  Who incurred the debt? Check one.            | As of the date you file, the claim                           | is: Check all that apply                      |        |  |
|                  | ☐ Debtor 1 only   | ☐ Contingent   |   |        |  |
|                  | ■ Debtor 2 only   | ☐ Unliquidated   |   |        |  |
|                  | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |        |  |
|                  | ☐ At least one of the debtors and another                                       | Type of NONPRIORITY unsecured                                |   |        |  |
|                  | ☐ Check if this claim is for a community  | ☐ Student loans  |   |        |  |
|                  | debt<br>Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   |   |        |  |
|                  | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts              |        |  |
|                  | Yes   | Other. Specify Credit Card                                   | <u> </u>                                      |        |  |
| 4.1              | Huntington Bank   | Last 4 digits of account number                              | 3917  | \$0.00 |  |
|                  | Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 182519 Columbus, OH 43218 | When was the debt incurred?                                  | Opened 01/16 Last Active 3/10/16              |        |  |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.             | As of the date you file, the claim                           | is: Check all that apply                      |        |  |
|                  | Debtor 1 only   | ☐ Contingent   |   |        |  |
|                  | Debtor 2 only   |  |   |        |  |
|                  | ■ Debtor 1 and Debtor 2 only □ Disputed   |  |   |        |  |
|                  | $\square$ At least one of the debtors and another                               | Type of NONPRIORITY unsecured                                | d claim:                                      |        |  |
|                  | $\square$ Check if this claim is for a community debt                           |  | ration agreement or divorce that you did not  |        |  |
|                  | Is the claim subject to offset?   | report as priority claims                                    |   |        |  |
|                  | No  | ☐ Debts to pension or profit-sharin                          |   |        |  |
|                  | Yes   | Other. Specify Automobile                                    | •   |        |  |

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| Debtor<br>Debtor | 1 Severiano Blancas<br>2 Maria Martinez                              |   | Case number (if know)                        |            |
|------------------|--|---|--|------------|
| 4.1              | Hy Cite/royal Prestige   | Last 4 digits of account number                             | 9469   | \$0.00     |
|                  | Nonpriority Creditor's Name  | _   | One and 00/44 Least Astive                   |            |
|                  | 333 Holtzman Rd<br>Madison, WI 53713                                 | When was the debt incurred?                                 | Opened 08/14 Last Active<br>10/27/16         |            |
|                  | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim i                        | s: Check all that apply                      |            |
|                  | ☐ Debtor 1 only  | ☐ Contingent  |  |            |
|                  | ■ Debtor 2 only  | ☐ Unliquidated  |  |            |
|                  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|                  | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured                               | d claim:                                     |            |
|                  | ☐ Check if this claim is for a community                             | ☐ Student loans   |  |            |
|                  | debt Is the claim subject to offset?                                 | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not |            |
|                  | ■ No   | Debts to pension or profit-sharin                           | g plans, and other similar debts             |            |
|                  | Yes  | Other. Specify Installment                                  | Sales Contract                               |            |
| 4.1              | Kohls/Capital One  | Last 4 digits of account number                             | 4502   | \$572.00   |
|                  | Nonpriority Creditor's Name Kohls Credit Po Box 3043                 | When was the debt incurred?                                 | Opened 02/16 Last Active 8/06/16             |            |
|                  | Milwaukee, WI 53201  Number Street City State Zlp Code               | As of the date you file, the claim i                        | s: Check all that apply                      |            |
|                  | Who incurred the debt? Check one.                                    | •   |  |            |
|                  | ☐ Debtor 1 only  | ☐ Contingent  |  |            |
|                  | ■ Debtor 2 only  | ☐ Unliquidated  |  |            |
|                  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|                  | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured                               | d claim:                                     |            |
|                  | ☐ Check if this claim is for a community                             | ☐ Student loans   |  |            |
|                  | debt Is the claim subject to offset?                                 | Obligations arising out of a separeport as priority claims  | ration agreement or divorce that you did not |            |
|                  | ■ No   | Debts to pension or profit-sharin                           | g plans, and other similar debts             |            |
|                  | ☐ Yes  | Other Specify Charge Acc                                    | count  |            |
| 4.1              | Sears Credit Cards   | Last 4 digits of account number                             |  | \$1,347.00 |
| <u> </u>         | Nonpriority Creditor's Name PO Box 183082                            | When was the debt incurred?                                 |  |            |
|                  | Columbus, OH 43218-3082  Number Street City State Zlp Code           | As of the date you file, the claim i                        | s: Check all that apply                      |            |
|                  | Who incurred the debt? Check one.                                    |   |  |            |
|                  | Debtor 1 only  | ☐ Contingent  |  |            |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated  |  |            |
|                  | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|                  | $\square$ At least one of the debtors and another                    | Type of NONPRIORITY unsecured                               | d claim:                                     |            |
|                  | $\square$ Check if this claim is for a community debt                | ☐ Student loans ☐ Obligations arising out of a sepa         | ration agreement or divorce that you did not |            |
|                  | Is the claim subject to offset?                                      | report as priority claims                                   | .,,  |            |
|                  | ■ No   | Debts to pension or profit-sharing                          | g plans, and other similar debts             |            |
|                  | ☐ Yes  | ■ Other, Specify credit card                                |  |            |

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| Debto<br>Debto | or 1 Severiano Blancas<br>or 2 Maria Martinez  |   | Case number (if know)                         |        |  |
|----------------|--|---|---|--------|--|
| 4.1<br>4       | State Farm Bank  | Last 4 digits of account number   | 0001  | \$0.00 |  |
|                | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 2328 Bloomington, IL 61702   | When was the debt incurred?   | Opened 03/16 Last Active 5/20/17              |        |  |
|                | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim  | is: Check all that apply                      |        |  |
|                | ☐ Debtor 1 only ☐ Debtor 2 only  | ☐ Contingent☐ Unliquidated  |   |        |  |
|                | ■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  | ☐ Disputed  Type of NONPRIORITY unsecure                                      | d claim:                                      |        |  |
|                | ☐ Check if this claim is for a community debt  | Student loans   | aration agreement or divorce that you did not |        |  |
|                | Is the claim subject to offset?  □ Po  report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts |   |   |        |  |
|                | ☐ Yes  | Other Specify Automobile  |   |        |  |
| 4.1<br>5       | State Farm Bank  | Last 4 digits of account number   | 0001  | \$0.00 |  |
|                | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 2328 Bloomington, IL 61702   | When was the debt incurred?   | Opened 09/14 Last Active 2/08/16              |        |  |
|                | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim  | is: Check all that apply                      |        |  |
|                | Debtor 1 only  | ☐ Contingent  |   |        |  |
|                | Debtor 2 only  | ☐ Unliquidated  |   |        |  |
|                | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |        |  |
|                | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured   | d claim:                                      |        |  |
|                | ☐ Check if this claim is for a community   | ☐ Student loans   |   |        |  |
|                | debt<br>Is the claim subject to offset?  | report as priority claims   | aration agreement or divorce that you did not |        |  |
|                | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts              |        |  |
|                | Yes  | Other. Specify Automobile   | 9   |        |  |
| 4.1<br>6       | Syncb/lenscrafters Nonpriority Creditor's Name   | Last 4 digits of account number   | 2045  | \$0.00 |  |
|                | Attn: Bankruptcy<br>Po Box 965060<br>Orlando, FL 32896   | When was the debt incurred?   | Opened 10/04 Last Active<br>1/07/07           |        |  |
|                | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim  | is: Check all that apply                      |        |  |
|                | Debtor 1 only  | ☐ Contingent  |   |        |  |
|                | Debtor 2 only  | ☐ Unliquidated  |   |        |  |
|                | Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |        |  |
|                | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure  |   |        |  |
|                | ☐ Check if this claim is for a community debt  | <ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul> |   |        |  |
|                | Is the claim subject to offset?  | report as priority claims   |   |        |  |
|                | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts              |        |  |
|                | ☐ Yes  | ■ Other. Specify Charge Ace   | count   |        |  |

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| Debtor<br>Debtor | 1 Severiano Blancas<br>2 Maria Martinez                                      |   | Case number (if know)                        |        |  |
|------------------|--|---|--|--------|--|
| 4.1<br>7         | Synchrony Bank/Sams  | Last 4 digits of account number   | 9680   | \$0.00 |  |
|                  | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred?   | Opened 12/04 Last Active 5/22/05             |        |  |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.          | As of the date you file, the claim  | s: Check all that apply                      |        |  |
|                  | ■ Debtor 1 only □ Debtor 2 only  | ☐ Contingent ☐ Unliquidated   |  |        |  |
|                  | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐     | ☐ Disputed  Type of NONPRIORITY unsecured  ☐ Student loans                                      | d claim:                                     |        |  |
|                  | Check if this claim is for a community debt Is the claim subject to offset?  |   | ration agreement or divorce that you did not |        |  |
|                  | ■ No   | Debts to pension or profit-sharin   | · ·  |        |  |
|                  | Yes  | Other. Specify Charge Acc   | count  |        |  |
| 4.1<br>8         | Synchrony Bank/Sams  | Last 4 digits of account number   | 6483   | \$0.00 |  |
|                  | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred?   | Opened 08/03 Last Active 9/20/05             |        |  |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.          | As of the date you file, the claim  | s: Check all that apply                      |        |  |
|                  | ☐ Debtor 1 only  | ☐ Contingent  |  |        |  |
|                  | ■ Debtor 2 only  | ☐ Unliquidated  |  |        |  |
|                  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |        |  |
|                  | ☐ At least one of the debtors and another                                    | Type of NONPRIORITY unsecured   | d claim:                                     |        |  |
|                  | ☐ Check if this claim is for a community                                     | ☐ Student loans   |  |        |  |
|                  | debt Is the claim subject to offset?   | report as priority claims   | ration agreement or divorce that you did not |        |  |
|                  | No   | Debts to pension or profit-sharing  | g plans, and other similar debts             |        |  |
|                  | Yes  | Other. Specify Charge Acc   | count  |        |  |
| 4.1<br>9         | Synchrony Bank/Sams Club  Nonpriority Creditor's Name                        | Last 4 digits of account number   | 1400   | \$0.00 |  |
|                  | Attn: Bankruptcy<br>Po Box 965060<br>Orlando, FL 32896                       | When was the debt incurred?   | Opened 1/28/16 Last Active 7/03/17           |        |  |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.          | As of the date you file, the claim  | s: Check all that apply                      |        |  |
|                  | ■ Debtor 1 only  | ☐ Contingent  |  |        |  |
|                  | ☐ Debtor 2 only  |   |  |        |  |
|                  | ☐ Debtor 1 and Debtor 2 only   | Debtor 1 and Debtor 2 only  |  |        |  |
|                  | ☐ At least one of the debtors and another                                    | st one of the debtors and another  Type of NONPRIORITY unsecured claim:                         |  |        |  |
|                  | ☐ Check if this claim is for a community debt                                | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not |  |        |  |
|                  | Is the claim subject to offset?  | report as priority claims   | •  |        |  |
|                  | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts             |        |  |
|                  | Yes  | ■ Other. Specify Credit Card  | l  |        |  |

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| Debtor<br>Debtor | 1 Severiano Blancas<br>2 Maria Martinez  |   | Case number (if know)                        |             |
|------------------|--|---|--|-------------|
| 4.2<br>0         | T-Mobile   | Last 4 digits of account number                                   | 9146   | \$880.00    |
|                  | Nonpriority Creditor's Name Customer Relations PO Box 37380 Albuquerque, NM 87176-7380 Number Street City State Zlp Code | When was the debt incurred?  As of the date you file, the claim i | s: Check all that apply                      |             |
|                  | Who incurred the debt? Check one.  |   |  |             |
|                  | ☐ Debtor 1 only  | ☐ Contingent  |  |             |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated  |  |             |
|                  | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |             |
|                  | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                     | d claim:                                     |             |
|                  | ☐ Check if this claim is for a community   | ☐ Student loans   |  |             |
|                  | debt Is the claim subject to offset?   | ☐ Obligations arising out of a sepa report as priority claims     | ration agreement or divorce that you did not |             |
|                  | ■ No   | Debts to pension or profit-sharin                                 | g plans, and other similar debts             |             |
|                  | Yes  | Other. Specify phone  |  |             |
| 4.2              | Us Bank  | Last 4 digits of account number                                   | 0547   | \$12,683.00 |
|                  | Nonpriority Creditor's Name Po Box 5229  | When was the debt incurred?                                       | Opened 10/16                                 |             |
|                  | Cincinnati, OH 45201  Number Street City State Zlp Code  Who incurred the debt? Check one.                               | As of the date you file, the claim i                              | s: Check all that apply                      |             |
|                  | ■ Debtor 1 only  | ☐ Contingent  |  |             |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated  |  |             |
|                  | ☐ Debtor 1 and Debtor 2 only   | □ Disputed  |  |             |
|                  | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                     | d claim:                                     |             |
|                  | ☐ Check if this claim is for a community debt  | ☐ Student loans   | ration agreement or divorce that you did not |             |
|                  | Is the claim subject to offset?  | report as priority claims   | ration agreement of divorce that you did not |             |
|                  | No   | Debts to pension or profit-sharing                                | g plans, and other similar debts             |             |
|                  | ☐ Yes  | Other. Specify personal lo  | an   |             |
| 4.2              | Us Bank  | Last 4 digits of account number                                   | 8848   | \$4,950.00  |
|                  | Nonpriority Creditor's Name Po Box 5229 Cincinnati, OH 45201   | When was the debt incurred?                                       | Opened 10/16                                 |             |
|                  | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim i                              | s: Check all that apply                      |             |
|                  | ☐ Debtor 1 only  | ☐ Contingent  |  |             |
|                  | ■ Debtor 2 only  | ☐ Unliquidated  |  |             |
|                  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |             |
|                  | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                     | d claim:                                     |             |
|                  | ☐ Check if this claim is for a community debt  | ☐ Student loans ☐ Obligations arising out of a sena               | ration agreement or divorce that you did not |             |
|                  | Is the claim subject to offset?  | report as priority claims   | agreement of divolve that you did 110t       |             |
|                  | ■ No   | Debts to pension or profit-sharing                                | g plans, and other similar debts             |             |
|                  | Yes  | Other. Specify personal lo  | an   |             |

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| Debtor<br>Debtor | 1 Severiano Blancas<br>2 Maria Martinez  |   | Case number (if know)                         |        |  |
|------------------|--|---|---|--------|--|
| 4.2              | Us Bank  | Last 4 digits of account number   | 6830  | \$0.00 |  |
|                  | Nonpriority Creditor's Name  Bankruptcy Department Po Box 5229  Cincinnati, OH 45201 | When was the debt incurred?   | Opened 08/15 Last Active 10/21/16             |        |  |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.                  | As of the date you file, the claim  | is: Check all that apply                      |        |  |
|                  | ■ Debtor 1 only □ Debtor 2 only  | ☐ Contingent☐ Unliquidated  |   |        |  |
|                  | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another               | ☐ Disputed  Type of NONPRIORITY unsecured   | d claim:                                      |        |  |
|                  | ☐ Check if this claim is for a community debt Is the claim subject to offset?        | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims  | aration agreement or divorce that you did not |        |  |
|                  | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts              |        |  |
|                  | Yes  | Other. Specify Unsecured  |   |        |  |
| 4.2              | US Bank  | Last 4 digits of account number   | 3364  | \$0.00 |  |
|                  | Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 5229 Cincinnati, OH 45201   | When was the debt incurred?   | Opened 03/15 Last Active 04/17                |        |  |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.                  | As of the date you file, the claim  |   |        |  |
|                  | ☐ Debtor 1 only  |   |   |        |  |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated  |   |        |  |
|                  | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |        |  |
|                  | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured   | d claim:                                      |        |  |
|                  | ☐ Check if this claim is for a community   | ☐ Student loans   |   |        |  |
|                  | debt Is the claim subject to offset?   | report as priority claims   | aration agreement or divorce that you did not |        |  |
|                  | No   | ☐ Debts to pension or profit-sharing  |   |        |  |
|                  | Yes  | Other. Specify Check Cred   | dit Or Line Of Credit                         |        |  |
| 4.2<br>5         | US Bank/Rms CC Nonpriority Creditor's Name   | Last 4 digits of account number   | 0198  | \$0.00 |  |
|                  | Card Member Services Po Box 108 St Louis, MO 63166                                   | When was the debt incurred?   | Opened 11/11 Last Active 09/17                |        |  |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.                  | As of the date you file, the claim  | is: Check all that apply                      |        |  |
|                  | ■ Debtor 1 only  | ☐ Contingent  |   |        |  |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated  |   |        |  |
|                  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |        |  |
|                  | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure  |   |        |  |
|                  | ☐ Check if this claim is for a community debt  | <ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separation agreement or divorce that you did not</li></ul> |   |        |  |
|                  | Is the claim subject to offset?  | report as priority claims   |   |        |  |
|                  | ■ No   | ☐ Debts to pension or profit-sharing  |   |        |  |
|                  | Yes  | Other. Specify Credit Card  | I   |        |  |

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| or 1 Severiano Blancas<br>or 2 Maria Martinez                 |   | Case number (if know)            |       |  |  |
|---|---|----------------------------------|-------|--|--|
| US Bank/Rms CC  | Last 4 digits of account number   | 0253                             | \$0.0 |  |  |
| Nonpriority Creditor's Name  Card Member Services  Po Box 108 | When was the debt incurred?   | Opened 10/12 Last Active 09/17   |       |  |  |
| St Louis, MO 63166  Number Street City State Zlp Code         | As of the date you file, the claim  |                                  |       |  |  |
| Who incurred the debt? Check one.  Debtor 1 only              | ☐ Contingent  |                                  |       |  |  |
| ☐ Debtor 2 only   | ☐ Unliquidated  |                                  |       |  |  |
| ☐ Debtor 1 and Debtor 2 only                                  | ☐ Disputed  |                                  |       |  |  |
| ☐ At least one of the debtors and another                     | Type of NONPRIORITY unsecure  | d claim:                         |       |  |  |
| ☐ Check if this claim is for a community                      | ☐ Student loans   |                                  |       |  |  |
| debt Is the claim subject to offset?                          | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                                  |       |  |  |
| No  | Debts to pension or profit-sharing  | g plans, and other similar debts |       |  |  |
| ☐ Yes   | ■ Other. Specify Credit Card  | I                                |       |  |  |

### Part 3: List Others to Be Notified About a Debt That You Already Listed

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Tatal Olaim

|              |     |   |     | T  | otal Claim |
|--------------|-----|---|-----|----|------------|
|              | 6a. | Domestic support obligations  | 6a. | \$ | 0.00       |
| Total claims |     |   |     |    |            |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00       |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00       |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00       |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00       |
|              |     |   |     |    | otal Claim |
|              | 6f. | Student loans   | 6f. | \$ | 0.00       |
| Total claims |     |   |     |    |            |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00       |
|              | 6h. |   | 6h. | \$ | 0.00       |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 22,088.00  |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 22,088.00  |

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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|   |                          | DOCUME            | <u> </u>    |                                      |  |  |  |
|---|--------------------------|-------------------|-------------|--------------------------------------|--|--|--|
| Fill in this information to identify your case: |                          |                   |             |                                      |  |  |  |
| Debtor 1  | Severiano Blanca         | ıs                |             |                                      |  |  |  |
|   | First Name               | Middle Name       | Last Name   |                                      |  |  |  |
| Debtor 2  | Maria Martinez           |                   |             |                                      |  |  |  |
| (Spouse if, filing)                             | First Name               | Middle Name       | Last Name   |                                      |  |  |  |
| United States Ba                                | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                                      |  |  |  |
| Case number _                                   |                          |                   |             | ☐ Check if this is an amended filing |  |  |  |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| -   | Person or | company with<br>Name, Number | whom you have th<br>r, Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|---------------------|---|
| .1  |           |                              |  |                     |   |
|     | Name      |                              |  |                     |   |
|     | Number    | Street                       |  |                     | <u> </u>                                |
|     | City      |                              | State  | ZIP Code            | _                                       |
| .2  |           |                              |  |                     |   |
|     | Name      |                              |  |                     |   |
|     | Number    | Street                       |  |                     |   |
|     | City      |                              | State  | ZIP Code            | <del>_</del>                            |
| 2.3 |           |                              |  |                     |   |
|     | Name      |                              |  |                     |   |
|     | Number    | Street                       |  |                     |   |
|     | City      |                              | State  | ZIP Code            | _                                       |
| 2.4 |           |                              |  |                     |   |
|     | Name      |                              |  |                     | <del></del>                             |
|     | Number    | Street                       |  |                     | _                                       |
|     | City      |                              | State  | ZIP Code            |   |
| 2.5 | ,         |                              | <u> </u>   |                     |   |
|     | Name      |                              |  |                     | <del>_</del>                            |
|     | Number    | Street                       |  |                     |   |
|     | City      |                              | State  | ZIP Code            | <u> </u>                                |

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|                                |   | Docume  | nt Page 31 o   | of 56   |
|--------------------------------|---|---|--|---|
| Fill in this i                 | information to identify your  | case:   |  |   |
| Debtor 1                       | Severiano Blanca  | s   |  |   |
|                                | First Name  | Middle Name   | Last Name  |   |
| Debtor 2<br>(Spouse if, filing | Maria Martinez  First Name  | Middle Name   | Last Name  |   |
|                                | es Bankruptcy Court for the:  | NORTHERN DISTRICT   |  |   |
|                                | oo Dama aproj Godan io ino.   |   |  |   |
| Case numb                      | eer   |   |  | ☐ Check if this is an amended filing  |
|                                | Form 106H   | obtore  |  | 40/45   |
| Schea                          | ule H: Your Code  | eptors  |  | 12/15   |
| Arizona  No. 0  Yes.           | nin the last 8 years, have you<br>a, California, Idaho, Louisiana,<br>Go to line 3.<br>Did your spouse, former spou | Nevada, New Mexico, Pue<br>se, or legal equivalent live<br>ors. Do not include your | erto Rico, Texas, Washi with you at the time? spouse as a codebtor | y? (Community property states and territories include ington, and Wisconsin.)  If your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official |
| Form 1                         |   |   |  | 6G). Use Schedule D, Schedule E/F, or Schedule G to fil   |
|                                | Column 1: Your codebtor<br>lame, Number, Street, City, State and ZII  | P Code  |  | Column 2: The creditor to whom you owe the debt Check all schedules that apply:   |
| 3.1                            | Name  |   |  | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line   |
|                                | Number Street<br>City   | State   | ZIP Code   | _   |
| 3.2                            | Name  |   |  | ☐ Schedule D, line ☐ Schedule E/F, line   |
|                                | Number Street   |   |  | _   |
| (                              | City  | State   | ZIP Code   |   |

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| Fill                     | in this information to   | identify your ca   | se:  |   |  |  |  |  |  |
|--------------------------|--|--|--|---|--|--|--|--|--|
| De                       | otor 1   | Severiano BI   |  |   |  |  |  |  |  |
|                          | otor 2   | Maria Martino  | ez   |   |  |  |  |  |  |
| Un                       | ted States Bankruptc   | cy Court for the:  | NORTHERN DISTRIC   | CT OF ILLINOIS  |  |  |  |  |  |
|                          | se number  |  |  | -   | Check if this is:  |  |  |  |  |
| (If k                    | nown)  |  |  |   | An amended filing  |  |  |  |  |
|                          |  |  |  |   | A supplement showing postpetition chapter 13 income as of the following date:  |  |  |  |  |
| _                        | fficial Form   |  |  |   | MM / DD/ YYYY  |  |  |  |  |
| S                        | chedule I: Y   | our Inco   | ome  |   | 12/1   |  |  |  |  |
| sup<br>spo               | plying correct inforr<br>use. If you are sepa  | mation. If you a<br>rated and your   | are married and not filing wi  | ng jointly, and your spouse is livith you, do not include informati   | and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed,  |  |  |  |  |
| sup<br>spo<br>atta       | plying correct inforr<br>use. If you are sepa<br>ch a separate sheet   | mation. If you a<br>rated and your   | are married and not filing wi  | ng jointly, and your spouse is livith you, do not include informati   | ing with you, include information about your   |  |  |  |  |
| sup<br>spo<br>atta       | plying correct inforr<br>use. If you are sepa<br>ch a separate sheet   | mation. If you a<br>rated and your<br>to this form. C<br>Employment  | are married and not filing wi  | ng jointly, and your spouse is livith you, do not include informati   | ing with you, include information about your on about your spouse. If more space is needed,  |  |  |  |  |
| sup<br>spo<br>atta<br>Pa | plying correct inforruse. If you are separch a separate sheet  T1: Describe  Fill in your employ information.  If you have more th   | mation. If you a<br>trated and your<br>to this form. C<br>Employment<br>yment<br>nan one job,  | are married and not filing wi<br>spouse is not filing wi<br>On the top of any additi   | ng jointly, and your spouse is livith you, do not include informational pages, write your name and  | ing with you, include information about your<br>on about your spouse. If more space is needed,<br>I case number (if known). Answer every question  |  |  |  |  |
| sup<br>spo<br>atta<br>Pa | plying correct inforruse. If you are separate sheet  t1: Describe  Fill in your employ information.  If you have more the attach a separate period information about a                                       | mation. If you a<br>trated and your<br>to this form. C<br>Employment<br>yment<br>nan one job,<br>page with   | are married and not filing wi  | ng jointly, and your spouse is livith you, do not include informational pages, write your name and  | ing with you, include information about your on about your spouse. If more space is needed, I case number (if known). Answer every question  Debtor 2 or non-filing spouse                         |  |  |  |  |
| sup<br>spo<br>atta<br>Pa | plying correct inforruse. If you are separate sheet  t1: Describe  Fill in your employ information.  If you have more the attach a separate p  | mation. If you a<br>trated and your<br>to this form. C<br>Employment<br>yment<br>nan one job,<br>page with   | are married and not filing wi<br>spouse is not filing wi<br>On the top of any additi   | ng jointly, and your spouse is livith you, do not include informational pages, write your name and  Debtor 1  Employed                        | ing with you, include information about your on about your spouse. If more space is needed, I case number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed               |  |  |  |  |
| sup<br>spo<br>atta<br>Pa | plying correct inforruse. If you are separate sheet  t1: Describe  Fill in your employ information.  If you have more the attach a separate period information about a                                       | mation. If you a rated and your to this form. Complete to the things of the th | are married and not filling with the top of any addition the top of any additional top of ad | ng jointly, and your spouse is livith you, do not include informational pages, write your name and  Debtor 1  Employed  Not employed          | ing with you, include information about your on about your spouse. If more space is needed, I case number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed  Not employed |  |  |  |  |
| sup<br>spo<br>atta<br>Pa | plying correct inforruse. If you are separch a separate sheet  The Describe Fill in your employ information.  If you have more the attach a separate perinformation about a employers.  Include part-time, s | mation. If you a rated and your to this form. C  Employment  yment  man one job, page with additional  seasonal, or c.  clude student  | are married and not filling with the top of any addition the top of any additional top of any addition the top of any additional top of additional top of any additional top of  | pg jointly, and your spouse is livith you, do not include informational pages, write your name and  Debtor 1  Employed  Not employed  Laborer | Debtor 2 or non-filing spouse  Employed  Not employed  Line leader   |  |  |  |  |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,650.27 2,426.67 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. 0.00 +\$ 214.02 Calculate gross Income. Add line 2 + line 3. 2,650.27 2,640.69

Official Form 106I Schedule I: Your Income page 1

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| Debto<br>Debto |             | Severiano Blancas<br>Maria Martinez   | -        |                | Case      | e number ( <i>if kn</i> | own)       |            |   |                |                  |
|----------------|-------------|---|----------|----------------|-----------|-------------------------|------------|------------|---|----------------|------------------|
|                |             |   |          |                | Fo        | r Debtor 1              |            |            | or Debtor<br>on-filing s                |                |                  |
|                | Сор         | y line 4 here   | 4.       |                | \$_       | 2,650                   | .27        | \$         |   | ,640.69        | =<br> -<br> -    |
| 5.             | List        | all payroll deductions:   |          |                |           |                         |            |            |   |                |                  |
|                | 5a.         | Tax, Medicare, and Social Security deductions   | 5a       | ì.             | \$        | 614                     | .90        | \$         |   | 545.35         |                  |
|                | 5b.         | Mandatory contributions for retirement plans  | 5b       | ).             | \$        |                         | .00        | \$         |   | 0.00           | _                |
|                | 5c.         | Voluntary contributions for retirement plans  | 5c       | <b>;</b> .     | \$        | 0                       | .00        | \$         |   | 21.67          | •                |
|                | 5d.         | Required repayments of retirement fund loans  | 5d       | i.             | \$        | 0                       | .00        | \$         |   | 0.00           |                  |
|                | 5e.         | Insurance   | 5e       | <del>)</del> . | \$_       | 177                     | .93        | \$_        |   | 369.53         | <u>-</u>         |
|                | 5f.         | Domestic support obligations  | 5f.      |                | \$_       |                         | .00        | \$_        |   | 0.00           | _                |
|                | 5g.         | Union dues  | 5g       |                | \$_       |                         | .00        | \$_        |   | 0.00           | _                |
|                | 5h.         | Other deductions. Specify:  | _ 5h     | 1.+            | \$_       | 0                       | .00        | + \$_      |   | 0.00           | _                |
| 6.             | Add         | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.       |                | \$_       | 792                     | .83        | \$_        |   | 936.55         | <u>-</u>         |
| 7.             | Cald        | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.       |                | \$_       | 1,857                   | .44        | \$_        | 1                                       | ,704.14        | <u>.</u>         |
| 8.             | List<br>8a. | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total             |          |                |           |                         |            |            |   |                |                  |
|                | 01          | monthly net income.   | 8a       |                | \$_       |                         | .00        | \$_        |   | 0.00           | _                |
|                | 8b.<br>8c.  | Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce  |          |                | \$_<br>¢  |                         | .00        | \$_<br>e   |   | 0.00           | _                |
|                | 8d.         | settlement, and property settlement.  | 8c<br>8d |                | \$_<br>\$ |                         | .00        | \$_<br>\$  |   | 0.00           | _                |
|                | ou.<br>8e.  | Unemployment compensation Social Security   | 8e       |                | φ_<br>\$  |                         | .00<br>.00 | \$_<br>\$  |   | 0.00           | _                |
|                | 8f.         | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: | e<br>8f. | •              | \$_       | 0                       | .00        | \$_<br>\$_ |   | 0.00           | _                |
|                | 8g.         | Pension or retirement income  | 8g       |                | \$_       |                         | .00        | \$_        |   | 0.00           | _                |
|                | 8h.         | Other monthly income. Specify:  | _ 8h     | 1.+            | \$_       | 0                       | .00        | + \$_      |   | 0.00           | _                |
| 9.             | Add         | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.       |                | \$_       | 0                       | .00        | \$_        |   | 0.0            | 0                |
| 10             | Calc        | culate monthly income. Add line 7 + line 9.   | 10.      | \$             |           | 1,857.44                | + \$       | 1          | ,704.14                                 | = \$           | 3,561.58         |
|                |             | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |          |                |           | 1,007.114               |            |            | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                | 0,001100         |
|                | Incluothe   | e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:   | depe     |                |           | •                       |            | •          | Schedule                                | ∍ J.<br>+\$    | 0.00             |
|                |             | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines  |          |                |           |                         |            |            |   | \$             | 3,561.58         |
| 13.            | Do y        | you expect an increase or decrease within the year after you file this form   | ?        |                |           |                         |            |            |   | Combi<br>month | ned<br>ly income |
|                | _           | No.<br>Yes. Explain:  |          |                |           |                         |            |            |   |                |                  |

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| EHII       | in this informa             | tion to identify yo                    | our caca:      |   |  |                        |              |                                       |   |      |
|------------|-----------------------------|--|----------------|---|--|------------------------|--------------|---------------------------------------|---|------|
|            |                             | mon to laentily ye                     | Jui Case.      |   |  |                        |              |                                       |   |      |
| Deb        | tor 1                       | Severiano B                            | lancas         |   |  |                        |              | if this is:                           |   |      |
|            | otor 2                      | Maria Martin                           | ez             |   |  |                        | Α            |                                       | ving postpetition char<br>the following date: | ter  |
|            |                             |  |                |   |  |                        |              | ·                                     |   |      |
| Unit       | ed States Bankr             | ruptcy Court for the                   | : NORTH        | IERN DISTRICT OF ILLING                                     | OIS  |                        | MI           | M / DD / YYYY                         |   |      |
| 1          | e number<br>nown)           |  |                |   |  |                        |              |                                       |   |      |
| Of         | fficial Fo                  | rm 106J                                |                |   |  |                        |              |                                       |   |      |
| So         | chedule                     | J: Your                                | Exper          | ises  |  |                        |              |                                       |   | 12/1 |
| Be<br>info | as complete a               | and accurate as                        | possible.      | If two married people are<br>ch another sheet to this t     | e filing together, bo<br>form. On the top of | oth are ed<br>any addi | uall<br>tion | y responsible fo<br>al pages, write y | or supplying correct<br>your name and case    |      |
| Par        |                             | ibe Your House                         | hold           |   |  |                        |              |                                       |   |      |
| 1.         | Is this a joir  ☐ No. Go to |  |                |   |  |                        |              |                                       |   |      |
|            | _                           | s Debtor 2 live i                      | in a separa    | ate household?  |  |                        |              |                                       |   |      |
|            | ■ N                         |  |                |   |  |                        |              |                                       |   |      |
|            |                             |  | st file Offici | al Form 106J-2, <i>Expenses</i>                             | for Separate House                           | hold of De             | ebtor        | 2.                                    |   |      |
| 2.         | Do you have                 | e dependents?                          | ■ No           |   |  |                        |              |                                       |   |      |
|            | Do not list D<br>Debtor 2.  | ebtor 1 and                            | ☐ Yes.         | Fill out this information for each dependent                | Dependent's relati<br>Debtor 1 or Debtor     |                        |              | Dependent's age                       | Does dependent live with you?                 |      |
|            | Do not state                |  |                |   |  |                        |              |                                       | □ No  |      |
|            | dependents                  | names.                                 |                |   |  |                        |              |                                       | ☐ Yes<br>☐ No                                 |      |
|            |                             |  |                |   |  |                        |              |                                       | ☐ Yes   |      |
|            |                             |  |                |   |  |                        |              |                                       | □ No  |      |
|            |                             |  |                |   |  |                        |              |                                       | ☐ Yes   |      |
|            |                             |  |                |   |  |                        |              |                                       | □ No<br>□ Yes                                 |      |
| 3.         |                             | enses include                          |                | No  |  |                        |              |                                       | 55  |      |
|            |                             | f people other t<br>d your depende     |                | Yes   |  |                        |              |                                       |   |      |
| Par        |                             | ate Your Ongoi                         |                | v Evnancae  |  |                        |              |                                       |   |      |
| Est<br>exp | imate your ex               | cpenses as of yo                       | our bankrı     | uptcy filing date unless y<br>y is filed. If this is a supp |  |                        |              |                                       |   |      |
| the        |                             | h assistance an                        |                | government assistance it luded it on Schedule I: Y          |  |                        |              | Your exp                              | enses   |      |
| ,511       |                             | ,                                      |                |   |  |                        |              |                                       |   |      |
| 4.         |                             | or home owners<br>and any rent for the |                | ses for your residence. In<br>r lot.                        | nclude first mortgage                        | 4.                     | \$           |                                       | 1,272.04                                      |      |
|            | If not includ               | led in line 4:                         |                |   |  |                        |              |                                       |   |      |
|            | 4a. Real e                  | estate taxes                           |                |   |  | 4a.                    | \$           |                                       | 0.00  |      |
|            |                             | rty, homeowner's                       |                |   |  | 4b.                    | \$           |                                       | 0.00  |      |
|            |                             | maintenance, re<br>owner's associat    | •              | ipkeep expenses   |  | 4c.<br>4d.             |              |                                       | 90.00   |      |
| 5.         |                             |  |                | our residence, such as ho                                   | me equity loans                              | 4u.<br>5.              |              |                                       | 0.00  |      |

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|     |                          | eriano Blancas<br>ia Martinez C   | ase num   | ber (if known) |          |
|-----|--------------------------|---|-----------|----------------|----------|
| 6.  | Utilities:               |   |           |                |          |
|     | 6a. Elec                 | tricity, heat, natural gas  | 6a.       | \$             | 190.00   |
|     | 6b. Wate                 | er, sewer, garbage collection   | 6b.       | \$             | 60.00    |
|     | 6c. Tele                 | phone, cell phone, Internet, satellite, and cable services  | 6c.       | \$             | 345.00   |
|     | 6d. Othe                 | er. Specify:  | 6d.       | \$             | 0.00     |
| 7.  | Food and                 | housekeeping supplies   |           | \$             | 610.00   |
| 8.  | Childcare                | and children's education costs  | 8.        | \$             | 0.00     |
| 9.  | Clothing, I              | aundry, and dry cleaning  | 9.        | \$             | 105.00   |
| 10. | Personal of              | care products and services  | 10.       | \$             | 80.00    |
| 11. | Medical ar               | nd dental expenses  | 11.       | \$             | 105.00   |
| 12. |                          | ation. Include gas, maintenance, bus or train fare.   | 4.0       | •              | 275.00   |
|     |                          | ude car payments.   | 12.       | ·              | 375.00   |
|     |                          | nent, clubs, recreation, newspapers, magazines, and books   | 13.       |                | 0.00     |
|     |                          | contributions and religious donations   | 14.       | \$             | 0.00     |
| 15. | Insurance                |   |           |                |          |
|     | 15a. Life i              | ude insurance deducted from your pay or included in lines 4 or 20.  | 15a.      | ¢              | 0.00     |
|     |                          | th insurance  | 15b.      |                | 0.00     |
|     |                          | cle insurance   | 15b.      | ·              |          |
|     |                          |   |           | · ·            | 145.00   |
| 16  |                          | er insurance. Specify:  | 15d.      | Ф              | 0.00     |
|     | Specify:                 | not include taxes deducted from your pay or included in lines 4 or 20.  It or lease payments:   | 16.       | \$             | 0.00     |
| 17. | 17a Cari                 | payments for Vehicle 1  | 17a.      | \$             | 414,21   |
|     |                          | payments for Vehicle 2  | 17b.      | *              | 0.00     |
|     | 176. Othe                |   | 17c.      | · ·            | 0.00     |
|     | 17d. Othe                | • • •   | - 17d.    | ·              | 0.00     |
| 10  |                          | nents of alimony, maintenance, and support that you did not report as   | _ '''.    | Ψ              | 0.00     |
| 10. |                          | from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).   | 18.       | \$             | 0.00     |
| 19. |                          | ments you make to support others who do not live with you.  |           | \$             | 100.00   |
|     |                          | Support of parents in Mexico  | 19.       |                |          |
| 20. |                          | property expenses not included in lines 4 or 5 of this form or on Schedu  | ule I: Yo | our Income.    |          |
|     | 20a. Mort                | gages on other property   | 20a.      | \$             | 0.00     |
|     | 20b. Real                | estate taxes  | 20b.      | \$             | 0.00     |
|     | 20c. Prop                | perty, homeowner's, or renter's insurance   | 20c.      | \$             | 0.00     |
|     | 20d. Main                | ntenance, repair, and upkeep expenses   | 20d.      | \$             | 0.00     |
|     | 20e. Hom                 | neowner's association or condominium dues   | 20e.      | \$             | 0.00     |
| 21. | Other: Spe               | ecifv:  | 21.       | +\$            | 0.00     |
|     | Calculate                | your monthly expenses nes 4 through 21.   |           | \$             | 3,891.25 |
|     |                          | line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  |           | \$             |          |
|     |                          | ne 22a and 22b. The result is your monthly expenses.  |           | \$             | 3,891.25 |
| 23. | Calculate                | your monthly net income.  |           |                |          |
|     | 23a. Copy                | y line 12 (your combined monthly income) from Schedule I.   | 23a.      | \$             | 3,561.58 |
|     | 23b. Copy                | y your monthly expenses from line 22c above.  | 23b.      | -\$            | 3,891.25 |
|     |                          | ract your monthly expenses from your monthly income.  | 23c.      | \$             | -329.67  |
| 24. | Do you ex<br>For example | pect an increase or decrease in your expenses within the year after you, do you expect to finish paying for your car loan within the year or do you expect your m to the terms of your mortgage?  Explain here: | file this | s form?        |          |
|     | <b>–</b> 165.            | Explain note.   |           |                |          |

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| Fill in this infor                 | mation to identify your                          | case:   |            |         |                              | Ī       |  |
|------------------------------------|--|---|------------|---------|------------------------------|---------|--|
| Debtor 1                           | Severiano Blanca                                 |   |            |         |                              |         |  |
| DCDIOI 1                           | First Name                                       | Middle Name   | Las        | st Name |                              |         |  |
| Debtor 2                           | Maria Martinez                                   |   |            |         |                              |         |  |
| Spouse if, filing)                 | First Name                                       | Middle Name   | Las        | st Name |                              |         |  |
|                                    | ankruptcy Court for the:                         | NORTHERN DISTRICT O   | E II I INO | ıç      |                              |         |  |
| Jilled States Da                   | inkruptcy Court for the.                         | NORTHLINI DISTRICT O  | 1 ILLIINO  | 10      |                              |         |  |
| Case number                        |  |   |            |         |                              |         |  |
| f known)                           |  |   |            |         |                              |         | Check if this is an amended filing                       |
| ou must file thi<br>btaining money | s form whenever you f                            | r, both are equally respons<br>le bankruptcy schedules on<br>n connection with a bankru<br>519, and 3571. | r amend    | ed sche | edules. Making a false sta   |         |  |
| Sign                               | n Below  |   |            |         |                              |         |  |
| Did you pa                         | y or agree to pay some                           | one who is NOT an attorne   | y to help  | you fil | I out bankruptcy forms?      |         |  |
| ■ No                               |  |   |            |         |                              |         |  |
| ☐ Yes. N                           | Name of person                                   |   |            |         |                              |         | etition Preparer's Notice,<br>nature (Official Form 119) |
|                                    | Ity of perjury, I declare<br>e true and correct. | that I have read the summa  | ary and s  | chedul  | les filed with this declarat | ion and |  |
| X /s/ Sev                          | eriano Blancas                                   |   | х          | /s/ Ma  | aria Martinez                |         |  |
| Severi                             | ano Blancas                                      |   |            |         | a Martinez                   |         |  |
| Signatu                            | re of Debtor 1                                   |   |            | Signat  | ture of Debtor 2             |         |  |
| Date                               | November 16, 2017                                |   |            | Date    | November 16, 2017            |         |  |

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| Fill i          | n this inforn            | nation to identify you                        | case:  |  |   |   |
|-----------------|--------------------------|---|--|--|---|---|
| Debt            | or 1                     | Severiano Blanc                               | as   |  |   |   |
|                 |                          | First Name                                    | Middle Name  | Last Name  |   |   |
| Debt<br>(Spou   | or 2<br>se if, filing)   | Maria Martinez First Name                     | Middle Name  | Last Name  |   |   |
|                 |                          | okruptov Court for the                        | NORTHERN DISTRICT  | OE II LINOIS                                       |   |   |
| Unite           | ed States Da             | nkruptcy Court for the:                       | NORTHERN DISTRICT  | OF ILLINOIS  |   |   |
| Case<br>(if kno | e number<br>wn)          |   |  |  |   | Check if this is an amended filing                    |
| Sta             |                          | of Financial                                  | Affairs for Indivi   |  |   | 4/16  |
| infori<br>numb  | mation. If moer (if know | ore space is needed,<br>n). Answer every ques | attach a separate sheet to stion.  | this form. On the top o                            | nare equally responsible for sur<br>f any additional pages, write y |   |
| Part            |                          |   | rital Status and Where Yo  | u Lived Before                                     |   |   |
| 1.              | wnat is you              | current marital statu                         | S?   |  |   |   |
|                 | ■ Married □ Not mar      | ried  |  |  |   |   |
| 2.              | During the la            | ast 3 years, have you                         | lived anywhere other than  | where you live now?                                |   |   |
|                 | ■ No<br>□ Yes. Lis       | t all of the places you l                     | ived in the last 3 years. Do r   | not include where you live                         | e now.  |   |
|                 | Debtor 1 Pr              | ior Address:                                  | Dates Debtor 1 lived there   | Debtor 2 Prio                                      | or Address:   | Dates Debtor 2<br>lived there                         |
|                 |                          |   |  |  | munity property state or territor<br>to Rico, Texas, Washington and |   |
|                 | No                       |   |  |  |   |   |
|                 | ☐ Yes. Ma                | ke sure you fill out Sch                      | nedule H: Your Codebtors (C  | Official Form 106H).                               |   |   |
| Part            | 2 Explai                 | n the Sources of You                          | r Income   |  |   |   |
| l               | Fill in the tota         | I amount of income yo                         | nployment or from operation ureceived from all jobs and have income that you receive | all businesses, including                          |   | endar years?  |
|                 | □ No                     |   |  |  |   |   |
|                 | Yes. Fill                | in the details.                               |  |  |   |   |
|                 |                          |   | Debtor 1   |  | Debtor 2  |   |
|                 |                          |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions are exclusions) | Sources of income   | Gross income<br>(before deductions<br>and exclusions) |
|                 |                          | of current year until<br>d for bankruptcy:    | ■ Wages, commissions, bonuses, tips  | \$26,806.  | 20 ■ Wages, commissions, bonuses, tips                              | \$26,842.00   |
|                 |                          |   | ☐ Operating a business   |  | ☐ Operating a business  |   |

Official Form 107

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| Debtor 1 Severiano Biancas Debtor 2 Maria Martinez |        |                      | Case number (if known)  |  |   |                                     |   |  |               |   |
|--|--------|----------------------|-------------------------|--|---|-------------------------------------|---|--|---------------|---|
|  |        |                      |                         |  | <b>5</b>  |                                     |   |  |               |   |
|  |        |                      |                         |  | Sources of income<br>Check all that apply.  | (befo                               | ss income<br>ore deductions and<br>usions)                  | Sources of ince<br>Check all that a              |               | Gross income<br>(before deductions<br>and exclusions) |
|  |        |                      | dar year:<br>December   | 31, 2016 )   | ■ Wages, commissions, bonuses, tips   |                                     | \$32,130.62   | ■ Wages, combonuses, tips                        | missions,     | \$29,054.00   |
|  |        |                      |                         |  | ☐ Operating a business  |                                     |   | ☐ Operating a I                                  | ousiness      |   |
|  |        |                      | dar year be<br>December |  | ■ Wages, commissions, bonuses, tips   |                                     | \$30,213.62   | ■ Wages, combonuses, tips                        | missions,     | \$27,491.00   |
|  |        |                      |                         |  | ☐ Operating a business  |                                     |   | ☐ Operating a l                                  | ousiness      |   |
|  | List e | No                   | source and t            | ŭ  | Debtor 1 Sources of income  | ,                                   | not include income t  | hat you listed in lin  Debtor 2  Sources of ince |               | Gross income  |
|  |        |                      |                         |  | Sources of income Describe below.   | each<br>(befo                       | source<br>ore deductions and                                | Sources of inconstraints Describe below.         |               | Gross income<br>(before deductions<br>and exclusions) |
|  |        | _                    |                         |  |   |                                     | isions)   |  |               |   |
| Pa   | rt 3:  | List                 | Certain Pa              | yments You   | Made Before You Filed fo  | r Bankru                            | otcy  |  |               |   |
| <b>S</b> .   | Are    | <b>either</b><br>No. | Neither De              | ebtor 1 nor E<br>orimarily for a<br>90 days befo<br>Go to line 7 | 's debts primarily consum<br>Debtor 2 has primarily consum<br>personal, family, or househ<br>ore you filed for bankruptcy,<br>'.<br>each creditor to whom you p | sumer de<br>old purpo<br>did you pa | <b>bts.</b> Consumer debt<br>se."<br>ay any creditor a tota | ıl of \$6,425* or mor                            | re?           |   |
|  |        |                      |                         | paid that cr<br>not include                                      | editor. Do not include payme<br>payments to an attorney for<br>t on 4/01/19 and every 3 year  | ents for do<br>this bank            | omestic support obliq<br>ruptcy case.                       | gations, such as ch                              | ild support a | and alimony. Also, do                                 |
|  |        | Yes.                 |                         |  | or both have primarily consore you filed for bankruptcy,  |                                     |   | ıl of \$600 or more?                             |               |   |
|  |        |                      | ■ No.                   | Go to line 7   |   |                                     |   |  |               |   |
|  |        |                      | ☐ Yes                   | include pay  | each creditor to whom you p<br>ments for domestic support<br>this bankruptcy case.  |                                     |   |  |               |   |
|  | Cre    | ditor'               | s Name and              | d Address  | Dates of paym   | nent                                | Total amount paid   | Amount you still owe                             | Was this      | payment for   |

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Debtor 2 **Maria Martinez** Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address:

Debtor 1

Severiano Blancas

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Severiano Blancas

| Deb | otor 2 Maria Martinez   |               |  | Case number (  | (if known)                              |                           |
|-----|---|---------------|--|----------------|---|---------------------------|
| 14. | Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co   |               |  | ns with a tota | I value of more thar                    | n \$600 to any charity?   |
|     | Gifts or contributions to charities that to<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code)  |               | Describe what you contributed  |                | Dates you contributed                   | Value                     |
| Par | t 6: List Certain Losses  |               |  |                |   |                           |
| 15. | Within 1 year before you filed for bankrup or gambling?   | tcy or        | since you filed for bankruptcy, did y  | you lose anyt  | hing because of the                     | eft, fire, other disaster |
|     | ■ No □ Yes. Fill in the details.  |               |  |                |   |                           |
|     | how the loss occurred   | Include       | be any insurance coverage for the log the amount that insurance has paid. Log claims on line 33 of Schedule A/B: | _ist pending   | Date of your loss                       | Value of property lost    |
| Par | t 7: List Certain Payments or Transfers   |               |  |                |   |                           |
| 16. | Within 1 year before you filed for bankrup consulted about seeking bankruptcy or produced any attorneys, bankruptcy petition produced in the produced seeking bankruptcy petition produced in the produced seeking bankruptcy | reparii       | ng a bankruptcy petition?  |                |   | erty to anyone you        |
|     | □ No ■ Yes. Fill in the details.  |               |  |                |   |                           |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Yo  | ou            | Description and value of any prop transferred  | erty           | Date payment or transfer was made       | Amount of payment         |
|     | Law Offices of David Freydin, Ltd.<br>8707 Skokie Blvd<br>Suite 305<br>Skokie, IL 60077<br>david.freydin@freydinlaw.com   |               | Attorney Fees  |                | various                                 | \$2,000.00                |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y  | itors o       | r to make payments to your creditor  |                | r transfer any prop                     | erty to anyone who        |
|     | ■ No □ Yes. Fill in the details.  |               |  |                |   |                           |
|     | Person Who Was Paid<br>Address  |               | Description and value of any prop transferred  | erty           | Date payment<br>or transfer was<br>made | Amount of payment         |
| 18. | Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alread No                                       | busin<br>made | ness or financial affairs? as security (such as the granting of a s  |                |   |                           |
|     | Yes. Fill in the details.   |               |  |                |   |                           |
|     | Person Who Received Transfer Address  |               | Description and value of property transferred  |                | any property or received or debts       | Date transfer was made    |
|     | Person's relationship to you  |               |  | paid III ex    | onange                                  |                           |

Debtor 1

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Debtor 1 Severiano Blancas Debtor 2 Maria Martinez

Case number (if known)

| 19. | beneficiary? (These are often called asset-prote  |  | ny property to a | a self-settle | ed trust or similar device                           | of which you are a                            |
|-----|---|--|------------------|---------------|--|---|
|     | Yes. Fill in the details.   |  |                  |               |  |   |
|     | Name of trust   | Description and  | value of the pro | operty trans  | sferred  | Date Transfer was made                        |
| Pai | rt 8: List of Certain Financial Accounts, Instr   | uments, Safe Deposi  | t Boxes, and S   | torage Uni    | ts   |   |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No | other financial accou  | nts; certificate | s of deposi   |  |   |
|     | Yes. Fill in the details.   |  |                  |               |  |   |
|     |   | ast 4 digits of account number   | Type of acco     | ount or       | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables?  | ar before you filed fo   | r bankruptcy, a  | any safe de   | posit box or other depos                             | itory for securities,                         |
|     | ■ No □ Yes. Fill in the details.  |  |                  |               |  |   |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code)          |                  | Describe      | the contents   | Do you still have it?                         |
| 22. | Have you stored property in a storage unit or   | place other than you   | r home within    | 1 year befo   | re you filed for bankrupt                            | cy?   |
|     | ■ No □ Yes. Fill in the details.  |  |                  |               |  |   |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or<br>to it?<br>Address (Number, S<br>State and ZIP Code) |                  | Describe      | the contents   | Do you still have it?                         |
| Pa  | rt 9: Identify Property You Hold or Control fo  | r Someone Else   |                  |               |  |   |
| 23. | Do you hold or control any property that some for someone.  | eone else owns? Incl   | ude any prope    | rty you bor   | rowed from, are storing                              | for, or hold in trust                         |
|     | ■ No □ Yes. Fill in the details.  |  |                  |               |  |   |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the proj<br>(Number, Street, City, S<br>Code)                 |                  | Describe      | the property   | Value   |
| Pa  | rt 10: Give Details About Environmental Inform  | mation   |                  |               |  |   |
| For | the purpose of Part 10, the following definition  | s apply:   |                  |               |  |   |
|     | Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these states.                          | air, land, soil, surfac  | e water, groun   |               |  |   |
|     | Site means any location, facility, or property a to own, operate, or utilize it, including disposa  |  | environmental    | law, wheth    | ner you now own, operate                             | e, or utilize it or used                      |
|     | Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or  |  | as a hazardou    | s waste, ha   | azardous substance, toxi                             | c substance,                                  |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Severiano Blancas Debtor 2 Maria Martinez

Case number (if known)

| 24. | Has any governmental unit notified you that  | you may be liable or potentially liable                                   | e under or in    | violation of an environme  | ntal law?          |
|-----|--|---|------------------|--|--------------------|
|     | ■ No □ Yes. Fill in the details.   |   |                  |  |                    |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) |                  | nmental law, if you  | Date of notice     |
| 25. | Have you notified any governmental unit of a   | any release of hazardous material?  |                  |  |                    |
|     | ■ No □ Yes. Fill in the details.   |   |                  |  |                    |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) |                  | nmental law, if you  | Date of notice     |
| 26. | Have you been a party in any judicial or adm   | inistrative proceeding under any env                                      | ironmental la    | aw? Include settlements a  | nd orders.         |
|     | ■ No □ Yes. Fill in the details.   |   |                  |  |                    |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nature of t      | he case  | Status of the case |
| Par | 11: Give Details About Your Business or C  | Connections to Any Business   |                  |  |                    |
| 27. | Within 4 years before you filed for bankrupto  | y, did you own a business or have a                                       | ny of the foll   | owing connections to any   | business?          |
|     | ☐ A sole proprietor or self-employed in  | a trade, profession, or other activity                                    | , either full-ti | me or part-time  |                    |
|     | ☐ A member of a limited liability compa  | any (LLC) or limited liability partnersh                                  | nip (LLP)        |  |                    |
|     | ☐ A partner in a partnership   |   |                  |  |                    |
|     | ☐ An officer, director, or managing exe  | cutive of a corporation   |                  |  |                    |
|     | ☐ An owner of at least 5% of the voting  | or equity securities of a corporation                                     |                  |  |                    |
|     | No. None of the above applies. Go to Pa  | art 12.   |                  |  |                    |
|     | Yes. Check all that apply above and fill i   | in the details below for each busines                                     | s.               |  |                    |
|     | Business Name<br>Address   | Describe the nature of the business                                       |                  | oyer Identification number   | umber or ITIN      |
|     | (Number, Street, City, State and ZIP Code)   | Name of accountant or bookkeeper  |                  | Do not include Social Security number or ITIN.  Dates business existed |                    |
| 28. | 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |   |                  |  | de all financial   |
|     | ■ No<br>□ Yes. Fill in the details below.  |   |                  |  |                    |
|     | Name<br>Address<br>(Number, Street, City, State and ZIP Code)  | Date Issued   |                  |  |                    |
|     |  |   |                  |  |                    |

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| Debtor '  | 1 Severiano Blancas                            |                       |  |  |
|-----------|--|-----------------------|--|--|
| Debtor 2  | Maria Martinez                                 |                       | Case number (if known)   |  |
|           |  |                       |  |  |
| Part 12   | Sign Below                                     |                       |  |  |
| I have re | ead the answers on this Statement of Financi   | ial Δffairs a         | nd any attachments, and I declare under penalty of perjury that the answers  |  |
|           |  |                       | , concealing property, or obtaining money or property by fraud in connection |  |
|           | ankruptcy case can result in fines up to \$250 |                       |  |  |
|           | C. §§ 152, 1341, 1519, and 3571.               | ,,.                   |  |  |
| /- / O    | andana Diamana                                 | /-/ 84-               | and a Managhan and   |  |
|           | eriano Blancas                                 |                       | aria Martinez  |  |
|           | ano Blancas                                    | Maria Martinez        |  |  |
| Signatu   | re of Debtor 1                                 | Signature of Debtor 2 |  |  |
| Date      | November 16, 2017                              | Date                  | November 16, 2017  |  |
| Did you   | attach additional pages to Your Statement o    | f Financial .         | Affairs for Individuals Filing for Bankruptcy (Official Form 107)?           |  |
| ■ No      |  |                       |  |  |
| ☐ Yes     |  |                       |  |  |
| Did you   | pay or agree to pay someone who is not an      | attorney to           | help you fill out bankruptcy forms?  |  |
| ■ No      |  |                       |  |  |
| ☐ Yes. I  | Name of Person Attach the Bankruptcy           | Petition Pre          | parer's Notice, Declaration, and Signature (Official Form 119).              |  |

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| Fill in this infor     | Fill in this information to identify your case: |                   |             |                       |  |  |
|------------------------|---|-------------------|-------------|-----------------------|--|--|
| Debtor 1               | Severiano Blanca                                | as                |             |                       |  |  |
|                        | First Name                                      | Middle Name       | Last Name   |                       |  |  |
| Debtor 2               | Maria Martinez                                  |                   |             |                       |  |  |
| (Spouse if, filing)    | First Name                                      | Middle Name       | Last Name   |                       |  |  |
| United States Ba       | ankruptcy Court for the:                        | NORTHERN DISTRICT | OF ILLINOIS |                       |  |  |
| Case number (if known) |   |                   |             | ☐ Check if this is an |  |  |
|                        |   |                   |             | amended filing        |  |  |

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt?    | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | ☐ Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes   |
| property securing debt:                                   | ☐ Retain the property and [explain]:                               |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.      | ☐ Yes   |
| property securing debt:                                   | ☐ Retain the property and [explain]:                               |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                                 |   |
| Description of  | Retain the property and enter into a  Reaffirmation Agreement.     | Yes   |
| property securing debt:                                   | ☐ Retain the property and [explain]:                               |   |
| Creditor's  | ☐ Surrender the property.  | □No   |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1<br>Debtor 2                    | Severiano Blancas<br>Maria Martinez  | Case number (if known)  |                                   |
|---|--|---|-----------------------------------|
|   |  |   |                                   |
| name:                                   |  | Retain the property and redeem it.  | ☐ Yes                             |
| Descrip                                 | otion of   | ☐ Retain the property and enter into a<br>Reaffirmation Agreement.  |                                   |
| property                                |  | ☐ Retain the property and [explain]:  |                                   |
| securin                                 | g debt:  |   | -                                 |
| Part 2:                                 | List Your Unexpired Personal Property L  | .eases  |                                   |
| For any ur                              | nexpired personal property lease that you  | u listed in Schedule G: Executory Contracts and Unexpired   | Leases (Official Form 106G), fill |
|   |  | ses. Unexpired leases are leases that are still in effect; the ease if the trustee does not assume it. 11 U.S.C. § 365(p)(2 |                                   |
| Describe                                | your unexpired personal property leases  |   | Will the lease be assumed?        |
| Lessor's n                              | name:  |   | □ No                              |
|   | n of leased  |   |                                   |
| Property:                               |  |   | ☐ Yes                             |
| Lessor's n                              | name:  |   | □ No                              |
|   | n of leased  |   | _                                 |
| Property:                               |  |   | ☐ Yes                             |
| Lessor's n                              | ame:   |   | □ No                              |
| Descriptio Property:                    | n of leased  |   | <b></b>                           |
| r roperty.                              |  |   | ☐ Yes                             |
| Lessor's n                              | name:  |   | □ No                              |
| Descriptio<br>Property:                 | n of leased  |   | ☐ Yes                             |
|   |  |   | Li res                            |
| Lessor's n                              |  |   | □ No                              |
| Description Property:                   | n of leased  |   | ☐ Yes                             |
| -19                                     |  |   | □ 165                             |
| Lessor's n                              |  |   | □ No                              |
| Property:                               | n of leased  |   | ☐ Yes                             |
| , ,                                     |  |   | <b>-</b> 100                      |
| Lessor's n                              | name:<br>n of leased   |   | □ No                              |
| Property:                               | ii oi leaseu   |   | ☐ Yes                             |
| Part 3:                                 | Sign Below   |   |                                   |
|   |  |   |                                   |
|   | ialty of perjury, I declare that I have indic<br>hat is subject to an unexpired lease. | ated my intention about any property of my estate that sec  | cures a debt and any personal     |
| χ /s/ S                                 | Severiano Blancas  | X /s/ Maria Martinez  |                                   |
| • | eriano Blancas   | Maria Martinez  |                                   |
| Signa                                   | ature of Debtor 1  | Signature of Debtor 2   |                                   |
| Date                                    | November 16, 2017  | Date <b>November 16, 2017</b>   |                                   |

Official Form 108

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-34432 Doc 1 Filed 11/16/17 Entered 11/16/17 19:16:40 Desc Main Document Page 50 of 56

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Illinois

| In re        | Severiano Blancas<br>Maria Martinez   |   | Case No.             |   |  |  |
|--------------|---|---|----------------------|---|--|--|
| III IC       | Maria Martinez  | Debtor(s)   | Chapter              | 7   |  |  |
|              | DISCLOSURE OF COMPE   | NCATION OF ATTOI  | DNEV EOD DE          | PDTOD(C)  |  |  |
|              | DISCLOSURE OF COMPE   |   |                      | . ,   |  |  |
| C            | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that empensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |   |                      |   |  |  |
|              | For legal services, I have agreed to accept   |   | \$                   | 2,000.00  |  |  |
|              | Prior to the filing of this statement I have received   |   | \$                   | 2,000.00  |  |  |
|              | Balance Due   |   | \$                   | 0.00  |  |  |
| 2. T         | he source of the compensation paid to me was:   |   |                      |   |  |  |
|              | ■ Debtor □ Other (specify):   |   |                      |   |  |  |
| 3. T         | he source of compensation to be paid to me is:  |   |                      |   |  |  |
|              | ■ Debtor □ Other (specify):   |   |                      |   |  |  |
| ı. <b>I</b>  | I have not agreed to share the above-disclosed comp   | pensation with any other person   | unless they are meml | pers and associates of my law firm.                 |  |  |
| [            | I have agreed to share the above-disclosed compens<br>copy of the agreement, together with a list of the na   |   |                      |   |  |  |
| 5. I         | n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |   |                      |   |  |  |
| b            | Preparation and filing of any petition, schedules, star<br>Representation of the debtor in adversary proceeding<br>[Other provisions as needed]<br>Negotiations with secured creditors to<br>reaffirmation agreements and application<br>522(f)(2)(A) for avoidance of liens on ho  | gs and other contested bankruptoreduce to market value; exc<br>ons as needed; preparation | ey matters;          | preparation and filing of<br>ons pursuant to 11 USC |  |  |
| б. В         | y agreement with the debtor(s), the above-disclosed fe<br>Representation of the debtors in any dis<br>any other adversary proceeding.   |   |                      | es, relief from stay actions or                     |  |  |
|              |   | CERTIFICATION   |                      |   |  |  |
| I<br>this ba | certify that the foregoing is a complete statement of an<br>nkruptcy proceeding.  | y agreement or arrangement for  | payment to me for re | epresentation of the debtor(s) in                   |  |  |
| No           | ovember 16, 2017  | /s/ David Freydin   |                      |   |  |  |
| Da           | te  | David Freydin   |                      |   |  |  |
|              |   | Signature of Attorne <b>Law Offices of D</b>  |                      |   |  |  |
|              |   | 8707 Skokie Blvd  |                      |   |  |  |
|              |   | Suite 305<br>Skokie, IL 60077   |                      |   |  |  |
|              |   | Name of law firm  |                      |   |  |  |

### Bankruptcy Legal Services Agreement

This is an agreement between Severiano and Maria Blancas (the Client) and the LAW OFFICES OF DAVID FREYDIN, P.C., a debt relief agency that helps people file bankruptcy under the Bankruptcy Code, by which the Client agrees to pay for these services in the following manner:

The fees in this contract are based on the information given by the Client in the initial consultation. After reasonable investigation, as required by law, if the Law Firm determines that the information is substantially different, then the Law Firm retains the right to withdraw from this contract. If the Law Firm determines that the information is substantially different then the Law Firm may offer a new contract at a different rate or may refuse representation in total.

Based on the information provided in the initial consultation the Client agrees to pay the Law Firm \$3000\_as a "Basic Flat Fee". The "Basic Flat Fee" includes the cost the filing fee with the US Bankruptcy Court, but does NOT include the cost of Personal Financial Management Instructional Courses (Debtor Education), the cost of Credit Counseling or any service not specifically listed in this contract. Part of the calculation that goes into the fee amount is based on the ability to file multiple cases as once. This is normally done at the end of the month. If the Debtor requires that the case be filed before the end of the month the Law Office may request an additional fee.

If the Client sees fit to sign a new attorney-client agreement with the Law Firm for services to file and/ or prepare a new bankruptcy filing then this agreement shall be no longer be valid and the new one will control, unless the new contract for bankruptcy services specifically states otherwise. If the new attorney-client agreement is for any other service besides preparing and or filing a new bankruptcy filing then this agreement shall remain valid.

The flat fee shall apply only to cases that have been filed with the court. If the services of the Law Firm are terminated either by the requirements set by the Law Firm or by the Client then all funds provided to the Law Firm may be applied to work completed by the Law Firm in accordance with the Illinois Rules of Professional Conduct Rules 1.16(a) (4) and (e) based on the regular hourly rate.

The "Basic Flat Fee" covers the following services: A) preparation and filing of a Voluntary Petition for Chapter 7 Bankruptcy with no amendments; B) attendance at the first meeting with the trustee scheduled by the court and C) the Law Firm will provide one copy of the filed Bankruptcy Petition and the Discharge of Debtor if applicable. If the Law Firm or the Client decide to terminate this agreement then any funds provided to the Law Office by the Client shall not be refundable to the extent that the Law Firm earns them and the Law Firm can hold the Client owing for any work completed in accordance with the Illinois Rules of Professional Conduct Rules 1.16(a) (4) and (e) based on the regular hourly rate. The debtor must pay for any costs incurred for filing fees or the cost of "reasonable investigation" as provided by law.

The "Basic Flat Fee" only covers those services specifically listed above. All other services are to be provided at the rate of \$395 ("regular hourly rate") per hour billed in 0.2 hour increments. Support staff time at \$95 per hour billed in 0.2 hour increments. While the petition is being prepared, if the Client requests substantial changes to the petition (e.g. changing the case from a single person to a joint filing) or if the filing is delayed so that the petition needs to be revised, then the Law Firm will impose a additional fee based on the hourly rate for the change, however, the charge will be no less than \$475.

Certain aspects of the services provided may be completed by clerical staff or by licensed and qualified counsel retained by the Law Firm to aid in the efficient and competent completion of the services as contracted. LAW OFFICES OF DAVID FREYDIN, P.C., may not provide all of the services in the contract personally. The attorneys may not be associates or of counsel to the Law Firm. Other attorneys may be used based on necessity. All attorney work will be billed at the same hourly rate set out in this contract regardless of the compensation agreement between the performing attorney and the Law Firm.

The Client authorizes the Law Firm to begin work necessary for bankruptcy filing. The Client authorizes the Law Firm to respond to phone calls from creditors and provide information regarding the preparation and subsequent filing of the bankruptcy. The Client agrees to cooperate with the attorney in the preparation of the Bankruptcy Petition and provide complete, accurate and truthful information for each and every question. The Client must respond promptly to all correspondence with the Law Firm and provide updated address and telephone numbers. The Client agrees to provide complete disclosure and accurate replacement value for all assets.

The Law Firm is authorized to immediately withdraw from representing the Client under any of the following circumstances: A) the Client fails to cooperate with the Law Firm in the preparation and implementation of the Client's case; B) the Client fails to pay fees and costs as agreed; C) the Client makes misrepresentations or misleading statements to the Law Firm; D) the Client delays filing for two (2) months from signing this agreement without making arrangements with the Law Firm; E) the Client delays filing until circumstances change which affect the bankruptcy law or the process of filing; F) the Client fails to cooperate

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in the process of preparing the bankruptcy or pursuing the Bankruptcy Petition or G) the Law Firm feels compelled to withdraw based on law, court order or ethical reasons.

All payment to the Law Firm shall constitute an "advance payment retainer". An advance payment retainer consists of a present payment to the Law Firm in exchange for the commitment to provide legal services in the future. Ownership of this retainer passes to the lawyer immediately upon payment. There exists the option to place funds provided to the Law Firm into a classic security retainer. However, this Attorney Client agreement does not provide for a classic security retainer due to the nature of the bankruptcy proceeding. Funds held under the classic security retainer may be subject to garnishment by creditors and could be seen as an asset by the bankruptcy court.

All documents and notes provided to the Law Firm may be destroyed at the Law Firm's discretion once the Law Firm has completed its representation of the client. The Law Office will impose a charge for replacing lost documents or sending copies of documents. The Client understands that in a Chapter 7 bankruptcy if they receive any substantial windfall within 180 days of filing they must report these amounts to the Chapter 7 Trustee and that these amounts may be taken by the Trustee to pay the debts listed in the bankruptcy.

The Client agrees to keep attorney informed of changes of address, phone number, etc. during the course of the Client's representation by the Law Firm. The Law Firm is not responsible for omissions or errors resulting from information from credit reports, regardless of whether the reports are obtained for the Client by the Law Firm. The Client is responsible for checking his/her petition at the time of signing to make sure that all information is correct and understood, and that all the creditors have been listed.

The Client acknowledges that the attorney is relying on the Client's representations as to the existence of assets and debts, the secured or unsecured nature of these debts as well as answer to all other questions on the petition. The Client understands that the Law Firm will not investigate the possible existence of existing liens against the Client's property or person. The Client understands that if any such liens pre-date the filing of the Bankruptcy Petition, it may not be possible to avoid such a lien and the Law Firm makes no representation that any such lien can be avoided. The Client understands that the attorney will not undertake any investigation to determine whether the creditors are secured or un-secured, but will rely upon representations from the Client as to any such security interests. The Client is responsible for paying for any costs incurred the preparation or prosecution of their case. The Client grants permission to the Law Firm to incur reasonable expenses on behalf of the Client towards the preparation and prosecution of this case for which the Client will be responsible.

In the event that this contract does not accurately reflect the representations by the attorney then it is important the Client not sign these documents until the corrections have been made. The Client acknowledges that no guarantees or assurances have been made by the Law Firm as to the disposition of the petition for bankruptcy. All comments by the attorney are expressions of opinion based upon experience as well as representations made by the Client. All expressions relative thereto are matters of opinion only.

If the Client sees fit to sign a new attorney-client agreement with the Law Firm for services to file and/ or prepare a new bankruptcy filing then this agreement shall be no longer be valid and the new one will control, unless the new contract for bankruptcy services specifically states otherwise. If the new attorney-client agreement is for any other service besides preparing and or filing a new bankruptcy filing then this agreement shall remain valid.

The Client has been informed that certain debts are not dischargeable in bankruptcy. The Law Firm can only offer an opinion on the dischargeability of debt based on the representations of the Client. This contract does not retain the Law Firm to investigate or litigate the determination of dischargability of a debt. The Client understands that Law Firm can make no representations as to the effect of bankruptcy filing on the creditor or credit reports of the Client, Client's spouse, or any co-debtor. The Law Firm is not retained to correct errors of credit reporting agencies. The Client has been informed that bankruptcy could have an effect on immigration, criminal, family law and other non-bankruptcy proceedings and that the Client should consult with an attorney to advise and assist them in these matters.

The Client acknowledges that they are solely responsible for the completion of both the credit counseling and the financial management courses required by the Bankruptcy Code. The Client has acknowledges that failure to complete the course in the set time could result in the case being closed without discharge of debt.

The Client has read this agreement and agrees with its terms and representations.

CLIENT:

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DATE: // 2017

LAW OFFICES OF DAVID FREYDIN, P.C

### United States Bankruptcy Court Northern District of Illinois

| In re | Severiano Blancas<br>Maria Martinez        |  | Case No.                        |               |  |  |
|-------|--|--|---------------------------------|---------------|--|--|
|       |  | Debtor(s)                              | Chapter 7                       |               |  |  |
|       | VE   | RIFICATION OF CREDITOR M               |                                 |               |  |  |
|       |  | Number of Creditors:                   |                                 | 28            |  |  |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | tors is true and correct to the | he best of my |  |  |
| Date: | November 16, 2017                          | /s/ Severiano Blancas                  |                                 |               |  |  |
|       |  | Severiano Blancas                      |                                 |               |  |  |
|       |  | Signature of Debtor                    | Signature of Debtor             |               |  |  |
| Date: | November 16, 2017                          | /s/ Maria Martinez                     |                                 |               |  |  |
|       |  | Maria Martinez                         | Maria Martinez                  |               |  |  |
|       |  | Signature of Debtor                    |                                 |               |  |  |

Blue Cross Blue Shield of Illinois PO 7344 Chicago, IL 60680-7344

Cbusasears Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Card Services Correspondence Dept Po Box 15278 Wilmington, DE 19850

Citizens Bank Attn: Bankruptcy 443 Jefferson Blvd Ms Rjw-135 Warwick, RI 02886

Citizens Bank Attn: Bankruptcy 443 Jefferson Blvd Ms Rjw-135 Warwick, RI 02886

Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218

Comenity Bank/Harlem Furniture Po Box 182125 Columbus, OH 43218

Ditech Financial Llc Po Box 6172 Rapid City, SD 57709

Fortiva H/mabtc/atls Po Box 10555 Atlanta, GA 30310 Huntington Bank Attn: Bankruptcy P.O. Box 182519 Columbus, OH 43218

Hy Cite/royal Prestige 333 Holtzman Rd Madison, WI 53713

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Sears Credit Cards PO Box 183082 Columbus, OH 43218-3082

State Farm Bank Attn: Bankruptcy Po Box 2328 Bloomington, IL 61702

State Farm Bank Attn: Bankruptcy Po Box 2328 Bloomington, IL 61702

State Farm Bank Attn: Bankruptcy Po Box 2328 Bloomington, IL 61702

Syncb/lenscrafters Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Sams Club Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

T-Mobile Customer Relations PO Box 37380 Albuquerque, NM 87176-7380

Us Bank Po Box 5229 Cincinnati, OH 45201

Us Bank Po Box 5229 Cincinnati, OH 45201

Us Bank Bankruptcy Department Po Box 5229 Cincinnati, OH 45201

US Bank Attn: Bankruptcy Dept Po Box 5229 Cincinnati, OH 45201

US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166

US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166